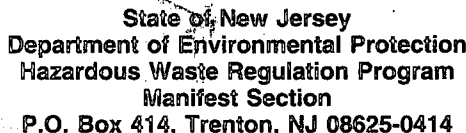


*Wastewater (Silver)*

352486







*Form Approved.*

OMB No. 2050-0039.

Information in the shaded areas  
is not required by Federal law.

**NJA 5303792**

in case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

## GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could make you subject to civil or criminal liabilities as specified in the New Jersey Hazardous Waste Regulations.

### INSTRUCTIONS-IMPORTANT:

#### READ ALL INSTRUCTIONS BEFORE COMPLETING

State & Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and if necessary the continuation sheet for both inter- and intrastate shipments. Continuation sheets may be purchased commercially and photocopied to provide copies as described below.

The New Jersey manifest contains 8 copies. **ALL COPIES MUST BE LEGIBLE.** This form is designed for use on a 12 pitch (elite) typewriter; a firm ball point pen may also be used only if you press down HARD. The 8 copies must be filed with the appropriate party as they are completed. **COPY DISTRIBUTION** is as follows:

- ORIGINAL:** **DESTINATION STATE-TSDF** must mail original to the state regulatory agency where the facility is located.
- COPY 2:** **GENERATOR STATE**-The TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3:** **GENERATOR COPY**-The TSDF mails this copy back to the generator of the waste.
- COPY 4:** **TSDF COPY**-TSDF keeps this copy for his records.
- COPY 5:** **TRANSPORTER COPY**-The transporter keeps this copy for his records.  
**NOTE:** If a *continuing transporter* is used the generator is responsible for supplying him with a legible photocopy, which must contain required signatures.
- COPY 6:** **DESTINATION STATE**-The generator mails this copy to the state regulatory agency where the designated facility (TSDF) is located.
- COPY 7:** **GENERATOR STATE**-The generator mails this copy to the state regulatory agency where the waste was generated.
- COPY 8:** **GENERATOR COPY**-the generator keeps this copy for his records.  
**ALL 8 COPIES MUST BE LEGIBLE**

### MANIFEST FORM ACQUISITION

- If the destination (consignment) state supplies a manifest & requires its use, then the generator is obligated to obtain the manifest from that state.
- If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest form from the generator state.
- If neither the generator state or the consignment state supplies the manifest, then the generator may obtain the manifest from any source.

### GENERATOR SECTION

- Item 1:** **GENERATOR'S EPA ID NO.-MANIFEST DOCUMENT NO.**-Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest, for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2:** **PAGE 1 Of** Enter the total number of pages used to complete this manifest; i.e. the first page plus the number of continuation sheets, if any.
- Item 3:** **GENERATOR'S NAME & MAILING ADDRESS**-Enter the name (as notified to EPA) & mailing address of the generator. The address should be the location that will manage the returned manifest forms.
- Item 4:** **GENERATOR'S PHONE NUMBER**-Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5:** **TRANSPORTER 1 COMPANY NAME**-Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6:** **US EPA ID NUMBER**-Enter the EPA identification number of the first transporter identified in item 5.
- Item 7:** **TRANSPORTER 2 COMPANY NAME**-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste, if more than two (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8:** **US EPA ID NUMBER**-If a second transporter is used, enter the EPA identification number of the second transporter identified in item 7.
- Item 9:** **DESIGNATED FACILITY NAME & SITE ADDRESS**-Enter the company name and site address (as notified to the EPA) of the treatment, storage, or disposal facility (TSDF) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10:** **EPA ID NUMBER**-Enter the EPA identification number of the designated TSDF (or waste reuse facility) listed in item 9.
- Item 11:** **USDOT DESCRIPTION**-Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a n.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than 4 wastes are being shipped, a second manifest or continuation sheets should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12:** **CONTAINERS (NO. & TYPE)**-Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of container used:

**TABLE 1  
CONTAINER TYPES**

DM-Metal drums, barrels, kegs  
DW-Wooden drums, barrels, kegs  
DF-Fiberboard or plastic drums, barrels, kegs  
TP-Tanks portable  
TT-Cargo tanks (Tank trucks)  
TC-Tank cars  
DT-Dump truck  
CY-Cylinders  
CM-Metal boxes, cartons, cases (including roll-offs)  
CW-Wooden boxes, cartons, cases  
CF-Fiber or plastic boxes, cartons, cases  
BA-Burlap, cloth, paper/plastic bags

- Item 13:** **TOTAL QUANTITY**-Enter the total quantity of waste described on each line.  
**DO NOT USE FRACTIONS**
- Item 14:** **UNIT (Vol./Wt.)**-Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line.

**TABLE II  
UNITS OF MEASURE**

G-Gallons (liquids only)  
P-Pounds  
T-Tons (2000 lbs.)  
Y-Cubic yards  
L-Liters (liquids only)  
K-Kilograms  
M-Metric Tons (1000 kg)  
cu-Cubic Meters

- Item 15:** **SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION**-Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information, if any. If an alternate facility is designated, note it here. For **INTERNATIONAL SHIPMENTS**, generators must enter the point of departure (city & state) in this space. This space may also be used for emergency response telephone numbers, and any other information the generator is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and USDOT hazardous materials.
- Item 16:** **GENERATOR'S CERTIFICATION** - The Generator must read, sign (by hand) and date the certification. This must be done the day the transporter picks up the waste shipment (date of receipt by transporter). If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, air) inserted in the space. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g. "and rail") in this space.
- Item A:** **STATE MANIFEST DOCUMENT NUMBER** - Number preprinted by New Jersey except on the continuation sheets. Enter this number on each continuation sheet attached to a manifest.
- Item B:** **STATE GEN ID** - The State Generator ID is the street address of the waste generation site. If the mailing address and the site address are the same, enter "same".
- Item C:** **STATE TRAN #1 ID** - Enter the New Jersey state permit number. This must include both the transporter's permit number and the decimal number of the hazardous waste transport unit or hazardous waste vehicle which contains the waste. For rail shipment(s) enter the alpha numeric I.D. number assigned to the railcar in lieu of the decimal number.
- Item D:** **TRANSPORTER PHONE**-Enter a telephone number with area code where an authorized agent of the transporter can be reached.
- Item E:** **STATE TRAN #2 ID** - If applicable, enter the New Jersey State permit number of the waste carrying portion of the second vehicle.
- Item F:** **TRANSPORTER 2 PHONE** - If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.
- Item G:** **STATE FACILITY'S ID** - No entry is required by New Jersey.
- Item H:** **FACILITY PHONE**-Enter a telephone number with area code of the TSDF designated to receive the waste listed on the manifest.
- Item I:** **WASTE NO.**-Enter the 4-digit hazardous waste number as it appears in N.J.A.C. 7:26G-5.1 et. seq. (For example "K047" is the waste number designated for pink/red water from TNT operations.) The proper waste number that accurately describes the shipment, shall be determined according to the hierarchy at N.J.A.C. 7:26G-5.2.
- Item J:** **ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE**-Enter description of analysis for any waste which does not have a complete USDOT shipping description or has an n.o.s. designation. Enter a general description of the waste stream. (i.e. groundwater contaminated with creosote and copper sulfate). Additionally, for any n.o.s. entry in item 11 which does not conform to the requirements at 49 CFR 172.203(i) enter the two components, and their percentages, which most predominantly contribute to the hazards of the mixture or solution. Enter the physical state (S = Solid, L = Liquid, G = Gas, SL = Sludge) EPA hazard codes (I = Ignitable, C = Corrosive, R = Reactive, E = Explosive, H = Acute Hazardous, T = Toxic). Enter additional information as required by the waste code hierarchy at N.J.A.C. 7:26G-6.2.

### TRANSPORTER SECTION

It is a violation by a transporter if he accepts hazardous waste from a generator who fails to properly complete the manifest, transports waste to an unauthorized facility, and/or fails to obtain the date and handwritten signature of the next hauler or next person of the TSDF facility on the manifest.

- Item 17:** **TRANSPORTER 1 ACKNOWLEDGEMENT**-Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.
- Item 18:** **TRANSPORTER 2 ACKNOWLEDGEMENT**-If applicable, follow instructions for item 17 for the second transporter.
- NOTE:** **ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.**

### DESIGNATED FACILITY (TSDF) SECTION

- Item 19:** **DISCREPANCY INDICATION SPACE**-The authorized representative of the designated facility must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected wastes. Owners and operators of facilities located in authorized States (i.e., those States that received authorization from the U.S. EPA to administer the hazardous waste program) should contact their State agency for information on State Discrepancy Report requirements.
- Item 20:** **FACILITY OWNER/OPERATOR CERTIFICATION**-Print or type the name of the person receiving the waste on behalf of the owner/operator of the designated TSDF. That person must acknowledge receipt of the waste described on the manifest by signing and entering the date of receipt.
- Item K:** **HANDLING CODES-TSDF SHOULD COMPLETE**-Enter the ultimate handling method utilized at the designated facility for each waste. Only the following process codes may be used: Storage=S01 (containers); S02 (Tank); S03 (Surface Impoundment); S05 (Other-specify); Treatment=T01 (Tank); T02 (Surface Impoundment); T03 (Incinerator); T04 (Other-specify); Disposal=D79 (Injection Well); D80 (Landfill); D81 (Land Application); D82 (Ocean Disposal); D83 (Surface Impoundment); D84 (Other-specify).
- \*NOTE** For interstate shipments you may be required to comply with the manifesting requirements of both the consignment and generator states regarding the completion of specific information included in listed items A-K. Please check with both generator and consignment states for specific requirements. New Jersey requires that all information be filled in except for item "G".

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimates including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.



DuPont Environmental Treatment

## Notification and Certification Form

OW/DW No. OW10502

Release No. \_\_\_\_\_

(Please fill in)

## Chambers Works Wastewater Treatment Facility Land Disposal Restrictions

1. Generator's EPA ID No. NYD 072 710 502

Hazardous Waste Manifest No. \_\_\_\_\_

Generator US EPA Reg II-Westwood Chemical Corp.Generators Address 46 Tower Drive,  
Middletown, NY 10941

Manifest Page No./Line Letter \_\_\_\_\_

(for drummed aqueous waste only)

Note: The DuPont Chambers Works Wastewater Treatment Plan (WWTP) is regulated under the Clean Water Act.

2. Is waste analysis information attached? ☐ Yes ☒ Not Available

3. In Table A, check (if applicable) the characteristic U.S. EPA hazardous waste codes that apply to this waste. For each waste code checked, identify whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed based on the options found on page 2.

TABLE A

Check Waste Code	U.S. EPA Hazardous Waste Code	Subcategory	Waste-water <sup>a</sup>	Non-Waste-water <sup>a</sup>	How must the waste be managed?
			(Check only one)		(Enter the letter from page 2)
<input type="checkbox"/>	D001	Low TOC (<10% TOC)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D001	High TOC (≥10% TOC)	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D001	Oxidizer	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Acid (pH ≤2)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Alkaline (pH ≥12.5)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Other Corrosives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Sulfides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Cyanides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Water reactive	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Explosives (pretreated)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Other reactives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D004	Arsenic	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D005	Barium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D006	Cadmium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D007	Chromium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D008	Lead	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D009	Mercury	<input type="checkbox"/>	NA	
<input type="checkbox"/>	D009	Low Mercury <260 mg/kg HG	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D010	Selenium	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	D011	Silver	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A

<sup>a</sup>Wastewaters contain <1% TOC and <1% TSS>

## Chambers Works Wastewater Treatment Facility Land Disposal Restrictions (cont.)

4. In Table B, identify all additional characteristic, listed, newly identified, and newly listed U.S. EPA hazardous waste codes that apply to this waste. For each waste code, identify the subcategory, indicate whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed, based on the options below.

TABLE B

U.S. EPA Hazardous Waste Code(s) Per 40 CFR 261	Subcategory		Waste- water*	Non- Waste- water*	How must the waste be managed? Enter the letter from options below*
			(Check only one)		
	Description	None			
D011		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

5. If this waste is a spent solvent (F001-F005), you **MUST** include Attachment II, Treatment Standards for F001-F005 Spent Solvents.
6. If this waste is a multisource Leachate (F039), you may include Attachment III, Treatment Standards for F039 Multisource Leachate Wastes.
7. If this waste is characteristically hazardous, you may include attachment IV, Universal Treatment Standards. You may also include Attachment IV for nonhazardous waste which was characteristically hazardous as generated but rendered nonhazardous by pretreatment.

\*HOW MUST THE WASTE BE MANAGED? (Choose from the following options to complete Tables A and B.)

A. Restricted waste requires treatment [40 CFR 268.7(a)(2)].

B. Restricted waste meets applicable treatment standards.

### GENERATOR'S CERTIFICATION (40 CFR 268.7(a)(3)(i))

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR 268 Subpart D. I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

C. Waste is newly listed or newly identified.

D. Restricted waste is exempt from the Land Disposal Restrictions. Check the reason below and write in the date the waste is subject to prohibitions [40 CFR 268.7(a)(4)].

☐ The waste has been granted a Site-Specific Variance.

☐ The waste has been given a Case-by-Case Extension.

☐ The waste is subject to a National Capacity Variance.

E. Restricted waste has been pretreated to remove the hazardous characteristic and requires treatment of underlying hazardous constituents.

### CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR 268.7(b)(4)(iv)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

F. Restricted waste has been pretreated on-site to remove the hazardous characteristic and to treat underlying hazardous constituents to levels in 40 CFR 268.48 Universal Treatment Standards.

### CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR 268.7(b)(4)(v)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic, and that underlying hazardous constituents, as defined in §268.2(i), have been treated on-site to meet the §268.48 Universal Treatment Standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

### CERTIFICATION

I certify that, to the best of my knowledge, the information provided in this document is true, accurate, and complete.



Authorized Signature

*W. SCHE COORDINATOR*

Title

*11-04-05*

Date



10562  
3

State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Manifest Section  
P.O. Box 414, Trenton, NJ 08625-0414

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved.

OMB No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. NJ 17 17 27 11 05 12 20 3 79 12		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address US EPA Reg 11-Westwood Chemical Corp. Site 2890 Woodbridge Ave., Bldg. 209, Edison, NJ 08837						A. State <b>NJA 5303792</b>			
4. Generator's Phone (302) 420-4514 Attn: Dilshad Perera						B. State Generator's ID (Gen. Site Address) Site: Sect 15			
5. Transporter 1 Company Name SA Transportation						C. State Trans. ID-NJDEP 123217X			
6. US EPA ID Number NJ 17 17 16 12 19 17 6						Decal No. 1081721			
7. Transporter 2 Company Name						D. Transporter's Phone (302) 529-2552			
8. US EPA ID Number						E. State Trans. ID-NJDEP			
9. Designated Facility Name and Site Address J.I. DuPont de Nemours and Company Chambers Works - Route 130 Deepwater, NJ 08023						Decal No.			
10. US EPA ID Number NJ 17 17 00 2 38 5 73 0						F. Transporter's Phone ( )			
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM						G. State Facility's ID			
12. Containers						H. Facility's Phone (856) 540-2773			
No. Type						13. Total Quantity			
14. Unit Wt/Vol						1. Waste No.			
a. X RQ, Hazardous Waste, Liquid, W.O.S. 9, NA3082, 111 (Silver)						001 TT 051336 01011			
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above A: App#OW10502-RE SRC 171 a. 105.2 c.						K. Handling Codes for Wastes Listed Above a. T101 c.			
b.						d.			
15. Special Handling Instructions and Additional Information Job# ROAM-SSCH- Emergency Contact: Capitol Environmental Services (302) 652-8999 Site: 46 Tower Dr., Middletown, NY 10941 Tractor: Trailer:									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name DILSHAD J. PERERA						Signature Month Day Year 11/10/405			
17. Transporter 1 Acknowledgement of Receipt of Materials									
Printed/Typed Name Tom Dombroski						Signature Month Day Year 11/10/403			
18. Transporter 2 Acknowledgement of Receipt of Materials									
Printed/Typed Name						Signature Month Day Year			
19. Discrepancy Indication Space IR-111 Material Assessed 10/10/06									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19									
Printed/Typed Name ROBERT MILLI						Signature Month Day Year 11/10/405			

EPA Form 8700-22

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

3-TSD MAIL TO-GENERATOR

NJ 5303792



## GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (credit to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly, completely, accurately or fully. Manifests are violations of the law, and could make you subject to civil or criminal liabilities as specified in the New Jersey Hazardous Waste Regulations.

## INSTRUCTIONS-IMPORTANT

### READ ALL INSTRUCTIONS BEFORE COMPLETING

State & Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and if necessary the continuation sheet for both inter- and intrastate shipments. Continuation sheets may be purchased commercially and photocopied to provide copies as described below.

The New Jersey manifest contains 6 copies. ALL COPIES MUST BE LEGIBLE. This form is designed for use on a 14 pitch (plus) typewriter. A ball point pen may also be used only if you press down HARD. The 6 copies must be filed with the appropriate party as they are completed. COPY DISTRIBUTION is as follows:

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- COPY 2: GENERATOR STATE-TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3: GENERATOR COPY-The TSDF mails this copy back to the generator of the waste.
- COPY 4: TSDF COPY-TSDF keeps this copy for his records.
- COPY 5: TRANSPORTER COPY-The transporter keeps this copy for his records. NOTE: If a continuing transporter is used the generator is responsible for supplying him with a legible photocopy, which must contain required signatures.
- COPY 6: DESIGNATION STATE-The generator mails this copy to the state regulatory agency where the designated facility (TSDF) is located.
- COPY 7: GENERATOR STATE-The generator mails this copy to the state regulatory agency where the waste was generated.
- COPY 8: GENERATOR COPY-The generator keeps this copy for his records.

## MANIFEST FORM ACQUISITION

- If the destination (consignment) state supplies a manifest & requires its use, then the generator is obligated to obtain the manifest from that state.
- If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest from the generator state.
- If neither the generator state or the consignment state supplies the manifest, then the generator may obtain the manifest from any source.

## GENERATOR SECTION

- Item 1: GENERATOR'S EPA ID NO.-MANIFEST DOCUMENT NO.-Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest, for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2: PAGE 1 OF - Enter the total number of pages used to complete this manifest; i.e. the first page plus the number of continuation sheets, if any.
- Item 3: GENERATOR'S NAME & MAILING ADDRESS-Enter the name (as notified to EPA) & mailing address of the generator. The address should be the location that will manage the returned manifest forms.
- Item 4: GENERATOR'S PHONE NUMBER-Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5: TRANSPORTER 1 COMPANY NAME-Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6: US EPA ID NUMBER-Enter the EPA identification number of the first transporter identified in item 5.
- Item 7: TRANSPORTER 2 COMPANY NAME-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste. If more than two (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
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- Item 9: DESIGNATED FACILITY NAME & SITE ADDRESS-Enter the company name and site address (as notified to EPA) of the treatment, storage, or disposal facility (TSDF) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10: EPA ID NUMBER-Enter the EPA identification number of the designated TSDF (or waste reuse facility) listed in item 9.
- Item 11: USDOT DESCRIPTION-Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a n.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than 4 wastes are being shipped, a second manifest or continuation sheets should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12: CONTAINERS (NO. & TYPE)-Enter the number of containers for each waste, and the appropriate abbreviations from Table 1 (below) for the type of container used:

DM-Metal drums, barrels, kegs  
 DW-Wooden drums, barrels, kegs  
 DF-Fiberboard or plastic drums, barrels, kegs  
 TP-Tanks portable  
 TT-Cargo tanks (Tank trucks)  
 TC-Tank cars  
 DT-Dump truck  
 CY-Cylinders  
 CB-Wooden boxes, cartons, cases (including roll-offs)  
 CW-Wooden crates, cartons, cases  
 CF-Fiber or plastic boxes, cartons, cases  
 BA-Bags, bulk, big bags, etc.

Item 13: TOTAL QUANTITY-Enter the total quantity of waste described on each line. DO NOT USE FRACTIONS

Item 14: UNIT (Abbrev.)-Enter the appropriate abbreviation from Table 1 (below) for the unit of measurement used for describing the quantity of waste described on each line.

## TABLE 1

Units of Measurement

Common Abbreviations  
 P-Pounds  
 T-Tons (2000 lbs)  
 Y-Cubic yards  
 L-Liters (liters only)  
 K-Kilograms  
 M-Meters (meters only)  
 M-Cubic meters

Item 15: SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION-Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information. If any of the following facility is designated, note it here. For INTERNATIONAL SHIPMENTS, the consignee must enter the point of departure (city & state) in the space provided. The consignee must also enter the emergency response telephone number and any other information on the generator or is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and 49 CFR Part 172, Subpart H for hazardous materials.

Item 16: GENERATOR'S CERTIFICATION-Enter the date and time (by hand) and date the certification was made. Enter the day the transporter picks up the waste shipment (date of receipt by transporter). The transporter must sign and date the certification. The transporter should be listed out and the transporter must sign and date the certification. The transporter should be listed out and the transporter must sign and date the certification.

Item 17: STATE FACILITY NO.-If the generator is located in New Jersey, enter the state facility number on the continuation sheet. If the generator is located in another state, enter the state facility number on the continuation sheet.

Item 18: STATE FACILITY NO.-If the generator is located in New Jersey, enter the state facility number on the continuation sheet. If the generator is located in another state, enter the state facility number on the continuation sheet.

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State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Manifest Section  
P.O. Box 414, Trenton, NJ 08625-0414



5303793

N YD 0 72 71 0 50 2 03 7 93

**NJA 5303793**

US EPA Regl-Westwood Chemical Corp. Site  
2890 Woodbridge Ave., Bldg.209, Edison, NJ 08837

B. State Generator ID-Gen ID No.

908 420-4514 Attn: Dllshad Perera

Site: Sect 15

**S.J. TRANSPORTATION**

**NJD 071629976**

C. State Trans ID-NJSEP 03217  
Decal No. 081793

D. Transporter's Phone: 800 329-2552

E. State Trans ID-NJSEP

Decal No.

F. Transporter's Phone

G. State Facility ID

H. Facility's Phone: 856 540-2773

E.I.DuPont de Nemours and Company  
Chambers Works - Route 130  
Deepwater, nJ 08023

**NJD 0 01 23 85 7 30**

11. US DOT Description including Proper Shipping Name, Hazard Class or Division, and Number and Packing Group

12. Containers  
No. Type

X RQ, Hazardous Waste, Liquid, N.O.S.  
9, NA3082, 111 (Silver)

0 01 T T 05129 G D 0 1 1

13. Additional Descriptions for Manifests Listed Above

A: App#OW10602 RE- ERG 171

14. Handling Codes for Waste, as used Above

15. Special Handling Instructions and Additional Information

Job# ROAN-SSCH-

Tractor: 1117

Emergency Contact: Capitol Environmental Services (302)652-8999

Site: 46 Tower Dr., Middletown, NY 10941

Trailer: TV251

72408K-N.J.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name, hazard class or division, and are in all respects in proper condition for transport by highway according to applicable international and/or national regulatory provisions.

If I am a large quantity generator, I hereby declare that I have a program in place to reduce the volume and toxicity of waste generated in the month of this year, determined to be economically practicable, and that I have selected a practicable method of treatment, storage, or disposal currently available to me, which will protect human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to determine the waste composition and select the best waste management method that is available to me and that I can afford.

Printed Name

**DILSHAD J. PERERA**

Signature

*[Signature]*

110405

17. Transporter's Name and Address for Receipt of Manifest

Printed Name

**GARY NEFF**

Signature

*[Signature]*

110405

18. Receiver's Name and Address for Receipt of Manifest

Printed Name

Signature

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

*Form Approved.*

OMB No. 2050-0039.

Information in the shaded areas  
is not required by Federal law

UNIFORM HAZARDOUS WASTE MANIFEST						
1. Generator's US EPA ID No.						
Manifest Document No.						
2. Page 1 of Information in the shaded areas is not required by Federal law.						
3. Generator's Name and Mailing Address <b>ON USA Regill-Westwood Chemical Corp. Site 890 Woodbridge Ave., Bldg. 209, Edison, NJ 08837</b>						
A. State Manifest Document Number <b>NJA 5303793</b>						
B. State Generator's ID-(Gen. Site Address) <b>Bldg. 209-13</b>						
4. Generator's Phone ( <b>908</b> ) <b>(22) 4314</b> 6. US EPA ID Number <b>HQD-715-2777E</b>						
C. State Trans. ID-NJDEP Decal No.-						
5. Transporter 1 Company Name <b>F.J. Dubent de Nemours and Company</b> 7. Transporter 2 Company Name						
8. US EPA ID Number						
D. Transporter's Phone (-)						
E. State Trans. ID-NJDEP Decal No.-						
F. Transporter's Phone (-)						
G. State Facility's ID						
H. Facility's Phone ( <b>908</b> ) <b>-336-2775</b>						
9. Designated Facility Name and Site Address <b>A.F. Dubent de Nemours and Company Phosphate Works - Route 139 Edgewater, NJ 08817</b>						
10. US EPA ID Number <b>DJD-010-13-05-713E</b>						
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) <b>HM</b>						
12. Containers						
No.	Type	13. Total Quantity	14. Unit Wt/Vol	L Waste No.		
a.	RQ, Corrosive waste, liquid, N.O.C. 2, UN3322, III (Silver)	0101 P	05129 G	EPA	L	
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above <b>JR- 179</b>						
K. Handling Codes for Wastes Listed Above						
a.	c.	a.	c.			
b.	d.	b.	d.			
15. Special Handling Instructions and Additional Information <b>Job# RDAG-BECH- Emergency Contacts Capital Environmental Services (202)693-8999 Site: 46 Tower Dr., Middletown, NY 10041</b>						
Tractor Tender						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name <b>DILSHAD J. PERERA</b>						
Signature <i>[Signature]</i> Month Day Year <b>1/1/99</b>						
TRANSPORTER T						
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name <b>SALLY ALAN</b> Signature <i>[Signature]</i> Month Day Year <b>1/1/99</b>						
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name _____ Signature _____ Month Day Year _____						
19. Discrepancy Indication Space						
FACILITY F						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name _____ Signature _____ Month Day Year _____						

**SIGNATURE AND INFORMATION *MUST* BE LEGIBLE ON ALL COPIES**

**8—GENERATOR COPY**

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

**NJA 5303793**

## GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could make you subject to civil or criminal liabilities as specified in the New Jersey Hazardous Waste Regulations.

### INSTRUCTIONS-IMPORTANT:

#### READ ALL INSTRUCTIONS BEFORE COMPLETING

State & Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and if necessary the continuation sheet for both inter- and intrastate shipments. Continuation sheets may be purchased commercially and photocopied to provide copies as described below.

The New Jersey manifest contains 8 copies. **ALL COPIES MUST BE LEGIBLE.** This form is designed for use on a 12 pitch (elite) typewriter; a firm ball point pen may also be used only if you press down HARD. The 8 copies must be filed with the appropriate party as they are completed. **COPY DISTRIBUTION** is as follows:

- ORIGINAL:** **DESTINATION STATE-TSDF** must mail original to the state regulatory agency where the facility is located.
- COPY 2:** **GENERATOR STATE**-The TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3:** **GENERATOR COPY**-The TSDF mails this copy back to the generator of the waste.
- COPY 4:** **TSDF COPY**-TSDF keeps this copy for his records.
- COPY 5:** **TRANSPORTER COPY**-The transporter keeps this copy for his records.
- NOTE:** If a *continuing transporter* is used the generator is responsible for supplying him with a legible photocopy, which must contain required signatures.
- COPY 6:** **DESTINATION STATE**-The generator mails this copy to the state regulatory agency where the designated facility (TSDF) is located.
- COPY 7:** **GENERATOR STATE**-The generator mails this copy to the state regulatory agency where the waste was generated.
- COPY 8:** **GENERATOR COPY**-the generator keeps this copy for his records.
- ALL 3 COPIES MUST BE LEGIBLE**

### MANIFEST FORM ACQUISITION

- If the destination (consignment) state supplies a manifest & requires its use, then the generator is obligated to obtain the manifest from that state.
- If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest form from the generator state.
- If neither the generator state or the consignment state supplies the manifest, then the generator may obtain the manifest from any source.

### GENERATOR SECTION

- Item 1:** **GENERATOR'S EPA ID NO.-MANIFEST DOCUMENT NO.**-Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest, for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2:** **PAGE 1 OF** Enter the total number of pages used to complete this manifest; i.e. the first page plus the number of continuation sheets, if any.
- Item 3:** **GENERATOR'S NAME & MAILING ADDRESS**-Enter the name (as notified to EPA) & mailing address of the generator. The address should be the location that will manage the returned manifest forms.
- Item 4:** **GENERATOR'S PHONE NUMBER**-Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5:** **TRANSPORTER 1 COMPANY NAME**-Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6:** **US EPA ID NUMBER**-Enter the EPA identification number of the first transporter identified in item 5.
- Item 7:** **TRANSPORTER 2 COMPANY NAME**-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste, if more than two (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8:** **US EPA ID NUMBER**-If a second transporter is used, enter the EPA identification number of the second transporter identified in item 7.
- Item 9:** **DESIGNATED FACILITY NAME & SITE ADDRESS**-Enter the company name and site address (as notified to the EPA) of the treatment, storage, or disposal facility (TSDF) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10:** **EPA ID NUMBER**-Enter the EPA identification number of the designated TSDF (or waste reuse facility) listed in item 9.
- Item 11:** **USDOT DESCRIPTION**-Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a n.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than 4 wastes are being shipped, a second manifest or continuation sheets should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12:** **CONTAINERS (NO. & TYPE)**-Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of container used:

**TABLE 1  
CONTAINER TYPES**

DM-Metal drums, barrels, kegs  
DW-Wooden drums, barrels, kegs  
DF-Fiberboard or plastic drums, barrels, kegs  
TP-Tanks portable  
TT-Cargo tanks (Tank trucks)  
TC-Tank cars  
DT-Dump truck  
CY-Cylinders  
CM-Metal boxes, cartons, cases (including roll-offs)  
CW-Wooden boxes, cartons, cases  
CF-Fiber or plastic boxes, cartons, cases  
BA-Burlap, cloth, paper/plastic bags

- Item 13:** **TOTAL QUANTITY**-Enter the total quantity of waste described on each line. **DO NOT USE FRACTIONS**
- Item 14:** **UNIT (Wt./Vol.)**-Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line.

**TABLE II  
UNIT OF MEASURE**

G-Gallons (liquid only)  
P-Pounds  
T-Tons (2000 lbs.)  
Y-Cubic yards  
L-Liters (liquids only)  
K-Kilogram  
M-Metric Tons (1000 kg)  
N-Cubic Meters

- Item 15:** **SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION**-Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information, if any. If an alternate facility is designated, note it here. For **INTERNATIONAL SHIPMENTS**, generators must enter the point of departure (city & state) in this space. This space may also be used for emergency response telephone numbers, and any other information the generator is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and USDOT hazardous materials.
- Item 16:** **GENERATOR'S CERTIFICATION**-The Generator must read, sign (by hand) and date the certification. This must be done the day the transporter picks up the waste shipment (date of receipt by transporter). If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (e.g. water) entered in the space. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g. "and rail") in this space.
- Item A:** **STATE MANIFEST DOCUMENT NUMBER**-Number preprinted by New Jersey except on the continuation sheets. Enter the number on each continuation sheet attached to a manifest.
- Item B:** **STATE GENERATOR ID**-State Generator ID is the street address of the waste generation site. If the mailing address and the site address are the same, enter "same".
- Item C:** **STATE TRANSPORTER ID**-Enter the New Jersey state permit number. This must include both the transporter's permit number and the serial number of the hazardous waste transport unit or hazardous waste vehicle which contains the waste. For rail shipment(s) enter the alpha numeric I.D. number assigned to the railcar in lieu of the decimal number.
- Item D:** **TRANSPORTER PHONE**-Enter a telephone number with area code where an authorized agent of the transporter can be reached.
- Item E:** **STATE TRANSPORTER ID**-If applicable, enter the New Jersey State permit number of the waste carrying portion of the second vehicle.
- Item F:** **TRANSPORTER PHONE**-If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.
- Item G:** **STATE FACILITY ID**-No entry is required by New Jersey.
- Item H:** **FACILITY PHONE**-Enter a telephone number with area code of the TSDF designated to receive the waste listed on the manifest.
- Item I:** **WASTE NO.**-Enter the 4-digit hazardous waste number as it appears in N.J.A.C. 7:26G-5.1 *et seq.* (For example, K079 is the waste number designated for pink/red water from TNT operations.) The proper waste number that accurately describes the shipment, shall be determined according to the hierarchy of N.J.A.C. 7:26G-6.2.
- Item J:** **ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE**-Enter description of analysis for any waste which does not have a complete USDOT shipping description or has an n.o.s. designation. Enter a general description of the waste stream. (i.e. groundwater contaminated with asbestos and copper sulfate). Additionally, for any n.o.s. entry in item 11 which does not conform to the requirements of 49 CFR 172.203(k) enter the two components, and their percentages, which most predominantly contribute to the hazards of the mixture or solution. Enter the physical state (S = Solid, L = Liquid, G = Gas, SL = Sludge) EPA hazard codes (I = Ignitable, C = Corrosive, R = Reactive, E = Toxic, H = Acute Hazardous, T = Toxic). Enter additional information as required by the waste code hierarchy at N.J.A.C. 7:26G-6.2.

### TRANSPORTER SECTION

It is a violation by the transporter if he accepts hazardous waste from a generator who fails to properly complete the manifest, transports waste to an unauthorized facility, and/or fails to obtain the date and handwritten signature of the next hauler owner/operator of the TSD facility on the manifest.

- Item 17:** **TRANSPORTER 1 ACKNOWLEDGEMENT**-Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.
- Item 18:** **TRANSPORTER 2 ACKNOWLEDGEMENT**-If applicable, follow instructions for item 17 for the second transporter.
- NOTE:** **ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.**

### DESIGNATED FACILITY (TSDF) SECTION

- Item 19:** **DISCREPANCY INDICATION SPACE**-The authorized representative of the designated facility must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected wastes. Owners and operators of facilities located in authorized States (i.e., those States that received authorization from the U.S. EPA to administer the hazardous waste program) should contact their State agency for information on State Discrepancy Report requirements.
- Item 20:** **FACILITY OWNER/OPERATOR CERTIFICATION**-Print or type the name of the person receiving the waste on behalf of the owner/operator of the designated TSDF. That person must acknowledge receiving the waste described on the manifest by signing and entering the date of receipt.
- Item K:** **HANDLING CODES-TSDF SHOULD COMPLETE**-Enter the ultimate handling method utilized at the designated facility for each waste. Only the following process codes may be used: Storage=S01 (container); S02 (Tank); S04 (Surface Impoundment); S05 (Other-specify); Treatment=T01 (Tank); T02 (Surface Impoundment); T03 (Incinerator); T04 (Other-specify); Disposal=D79 (Injection Well); D80 (Landfill); D81 (Land Application); D82 (Ocean Disposal); D83 (Surface Impoundment); D84 (Other-specify).
- \*NOTE** For interstate shipments you may be required to comply with the manifesting requirements of both the consignment and generator states regarding the completion of specific information included in letters J and K. Please check with both generator and consignment states for specific requirements. New Jersey requires that all information be filled in except for item "G".

Public reporting burden of this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimates including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, Office of Survey, S.W. Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.



DuPont Environmental Treatment

## Notification and Certification Form

OW/DW No. OW10502

Release No. \_\_\_\_\_

(Please fill in)

## Chambers Works Wastewater Treatment Facility Land Disposal Restrictions

1. Generator's EPA ID No. NYD 072 710 502Generator US EPA Reg II-Westwood Chemical Corp.Generators Address 46 Tower Drive,Middletown, NY 10941

Hazardous Waste Manifest No. \_\_\_\_\_

Manifest Page No./Line Letter \_\_\_\_\_

(for drummed aqueous waste only)

Note: The DuPont Chambers Works Wastewater Treatment Plan (WWTP) is regulated under the Clean Water Act.

2. Is waste analysis information attached? ☐ Yes ☒ Not Available

3. In Table A, check (if applicable) the characteristic U.S. EPA hazardous waste codes that apply to this waste. For each waste code checked, identify whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed based on the options found on page 2.

TABLE A

Check Waste Code	U.S. EPA Hazardous Waste Code	Subcategory	Waste-water*	Non-Waste-water*	How must the waste be managed?
			(Check only one)		(Enter the letter from page 2)
<input type="checkbox"/>	D001	Low TOC (<10% TOC)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D001	High TOC (≥10% TOC)	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D001	Oxidizer	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Acid (pH ≤2)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Alkaline (pH ≥12.5)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Other Corrosives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Sulfides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Cyanides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Water reactive	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Explosives (pretreated)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Other reactives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D004	Arsenic	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D005	Barium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D006	Cadmium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D007	Chromium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D008	Lead	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D009	Mercury	<input type="checkbox"/>	NA	
<input type="checkbox"/>	D009	Low Mercury <260 mg/kg HG	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D010	Selenium	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	D011	Silver	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A

\*Wastewaters contain <1% TOC and <1% TSS>

**Chambers Works Wastewater Treatment Facility Land Disposal Restrictions (cont.)**

4. In Table B, identify all additional characteristic, listed, newly identified, and newly listed U.S. EPA hazardous waste codes that apply to this waste. For each waste code, identify the subcategory, indicate whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed, based on the options below.

**TABLE B**

U.S. EPA Hazardous Waste Code(s) Per 40 CFR 261	Subcategory		Waste- water*	Non- Waste- water*	How must the waste be managed? Enter the letter from options below*
			(Check only one)		
	Description	None			
D011		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

5. If this waste is a spent solvent (F001-F005), you **MUST** include Attachment II, Treatment Standards for F001-F005 Spent Solvents.
6. If this waste is a multisource Leachate (F039), you may include Attachment III, Treatment Standards for F039 Multisource Leachate Wastes.
7. If this waste is characteristically hazardous, you may include attachment IV, Universal Treatment Standards. You may also include Attachment IV for nonhazardous waste which was characteristically hazardous as generated but rendered nonhazardous by pretreatment.

**"HOW MUST THE WASTE BE MANAGED?"** (Choose from the following options to complete Tables A and B.)

A. Restricted waste requires treatment [40 CFR 268.7(a)(2)].

B. Restricted waste meets applicable treatment standards.

**GENERATOR'S CERTIFICATION** (40 CFR 268.7(a)(3)(i))

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR 268 Subpart D. I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

C. Waste is newly listed or newly identified.

D. Restricted waste is exempt from the Land Disposal Restrictions. Check the reason below and write in the date the waste is subject to prohibitions [40 CFR 268.7(a)(4)].

☐ The waste has been granted a Site-Specific Variance. \_\_\_\_\_

☐ The waste has been given a Case-by-Case Extension. \_\_\_\_\_

☐ The waste is subject to a National Capacity Variance. \_\_\_\_\_

E. Restricted waste has been pretreated to remove the hazardous characteristic and requires treatment of underlying hazardous constituents.

**CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS** [40 CFR 268.7(b)(4)(iv)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.


F. Restricted waste has been pretreated on-site to remove the hazardous characteristic and to treat underlying hazardous constituents to levels in 40 CFR 268.48 Universal Treatment Standards.

**CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS** [40 CFR 268.7(b)(4)(v)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic, and that underlying hazardous constituents, as defined in §268.2(i), have been treated on-site to meet the §268.48 Universal Treatment Standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

**CERTIFICATION**

I certify that, to the best of my knowledge, the information provided in this document is true, accurate, and complete.

  
Authorized Signature

ON-SCENE COORDINATOR  
Title

11-04-05  
Date



TRACTOR # 1117  
TRAILER # TV251  
DRIVER : GARY NEFF

SJ TRANSPORTATION CO., INC.  
1176 U.S. ROUTE 40  
P.O. BOX 169  
WOODSTOWN, NJ 08098  
(856) 769-2741  
WWW.SJTRANSPORTATION.COM

ORDER # 15786  
PRINTED 11/3/2005  
BOOKED BY KELDE

MANIFEST # NJA5303793

SHIPPER:

CONSIGNEE:

USE MID 1 US EPA REG. II W  
46 TOWER DR.  
MIDDLETOWN, NY 10941

DUPDEE J DUPONT  
CHAMBERWORKS, R  
DEEPPATER, NJ 08023

DAVE BOFINGER  
(845) 692-9861

BRENDA SIMMONS  
(856) 540-2269

NJD002385730

TRAILER TYPE: TVAC

PICKUP DATE 11/4/2005

DELIVER DATE 11/4/2005

GROSS WT

UNIT:

TIME 8:00:00 AM

TIME 1:00:00 PM

TARE WT

IN # \_\_\_\_\_ OUT # \_\_\_\_\_

IN 0700 OUT 0800

IN \_\_\_\_\_ OUT \_\_\_\_\_

NET WT

COMMENTS (EXPLAIN DELAY AND DISCREPANCIES):

COMMENTS (EXPLAIN DELAY AND DISCREPANCIES):

DESCRIPTION:

GAL LOAD 5129

1-TANK

ORDER REF #15:

OW# : 10502 RE-

RQ. HAZARDOUS WASTE, LIQUID,  
N.O.S. 9, NA3082, 111 (SILVER)

SPECIAL INSTRUCTIONS:

VAC FROM FRAC TANK

BILL TO:

VACUUM YES X VACUUM NO \_\_\_\_\_

VACUUM START 0700

VACUUM FINISH 0730

CONTACT : VICKI 302-652-8999 X 101

CAPITOL ENVIRON

15 C TROLLEY SQ

WILMINGTON, DE 19806

I, THE UNDERSIGNED, CERTIFY THE LISTED INFORMATION AND DEMURRAGE TIME AND IS TRUE AND COMPLETE.

SHIPPER David B. R. ET DATE 11-4-05

CONSIGNEE \_\_\_\_\_ DATE \_\_\_\_\_

PERSONNEL ARE AVAILABLE 24 HOURS/DAY WITH KNOWLEDGE OF THE HAZARDS OF THE MATERIAL AND EMERGENCY RESPONSE INFORMATION OR WHO HAS ACCESS TO A PERSON WITH THAT KNOWLEDGE.

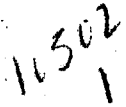
CARRIER : SJ TRANSPORTATION CO., INC. (800) 524-2552

PER :

DATE :

WHITE COPY - S-J, YELLOW COPY - DRIVER, PINK COPY - TSDF, GOLD COPY - CUSTOMER

11/4/05



**P.O. Box 414, Trenton, NJ 08625-0414**

**Form Approved.**

OMB No. 2050-0039

**SIGNATURE AND INFORMATION *MUST* BE LEGIBLE ON ALL COPIES**



## GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect, or illegible manifests are violations of the law, and could make you subject to civil or criminal liabilities as specified in the New Jersey Hazardous Waste Regulations.

### INSTRUCTIONS-IMPORTANT:

#### READ ALL INSTRUCTIONS BEFORE COMPLETING

State & Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and if necessary the continuation sheet for both inter- and intrastate shipments. Continuation sheets may be purchased commercially and photocopied to provide copies as described below.

The New Jersey manifest contains 8 copies. ALL COPIES MUST BE LEGIBLE. This form is designed for use on a 12 slash (12/11) typewriter; a firm ball point pen may also be used only if you press down HARD. The 8 copies must be filed with the appropriate party as they are completed. COPY DISTRIBUTION is as follows:

- ORIGINAL:** DESTINATION STATE-TSDF must mail original to the state regulatory agency where the facility is located.
- COPY 2:** GENERATOR STATE-The TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3:** GENERATOR COPY-The TSDF mails this copy back to the generator of the waste.
- COPY 4:** TSDF COPY-TSDF keeps this copy for his records.
- COPY 5:** TRANSPORTER COPY-The transporter keeps this copy for his records.  
NOTE: If a continuing transporter is used the generator is responsible for supplying him with a legible photocopy, which must contain required signatures.
- COPY 6:** DESTINATION STATE-The generator mails this copy to the state regulatory agency where the designated facility (TSDF) is located.
- COPY 7:** GENERATOR STATE-The generator mails this copy to the state regulatory agency where the waste was generated.
- COPY 8:** GENERATOR COPY-the generator keeps this copy for his records.

### MANIFEST FORM ACQUISITION

- If the destination (consignment) state supplies a manifest & requires its use, then the generator is obligated to obtain the manifest from that state.
- If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest from the generator state.
- If neither the generator state or the consignment state supplies the manifest, then the generator may obtain the manifest from any source.

### GENERATOR SECTION

- Item 1:** GENERATOR'S EPA ID NO.-MANIFEST DOCUMENT NO.-Enter the generator's EPA identification number. This manifest document number is a unique 5-digit number the generator assigns to each manifest, for his record-keeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2:** PAGE 1 Of ... Enter the total number of pages used to complete this manifest; i.e. the first page plus the number of continuation sheets, if any.
- Item 3:** GENERATOR'S NAME & MAILING ADDRESS-Enter the name (as notified to EPA) & mailing address of the generator. This address should be the location that will manage the returned manifest forms.
- Item 4:** GENERATOR'S PHONE NUMBER-Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5:** TRANSPORTER 1 COMPANY NAME-Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6:** US EPA ID NUMBER-Enter the EPA identification number of the first transporter identified in Item 5.
- Item 7:** TRANSPORTER 2 COMPANY NAME-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste. If more than two (2) transporters will be used, a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8:** US EPA ID NUMBER-If a second transporter is used, enter the EPA identification number of the second transporter identified in Item 7.
- Item 9:** DESIGNATED FACILITY NAME & SITE ADDRESS-Enter the company name and site address (as notified to the EPA) of the treatment, storage, or disposal facility (TSDF) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10:** EPA ID NUMBER-Enter the EPA identification number of the designated TSDF (or waste reuse facility) listed in Item 9.
- Item 11:** USDOT DESCRIPTION-Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a h.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than one waste is being shipped, a second manifest or continuation sheets should be used. For information on USDOT waste descriptions, call your USDOT regional office.
- Item 12:** CONTAINERS (NO. & TYPE)-Enter the number of containers for each waste, and the appropriate abbreviations from Table 1 (below) for the type of container used:

### CONTAINER TYPES

- DW-Metal drums, barrels, kegs
- DW-Wooden drums, barrels, kegs
- DF-Fiberboard or plastic drums, barrels, kegs
- TP-Tanks portable
- TT-Cargo tanks (Tank trucks)
- TC-Tank cars
- DT-Dump truck
- CY-Cylinders
- CM-Metal boxes, cartons, cases (including roll-offs)
- CW-Wooden boxes, cartons, cases
- CF-Fiber or plastic boxes, cartons, cases
- BA-Burlap, cloth, paper/plastic bags

**Item 13:** TOTAL QUANTITY-Enter the total quantity of waste described on each line. DO NOT USE FRACTIONS

**Item 14:** UNIT (VOLUME)-Enter the appropriate abbreviation from Table 1 (below) for the unit of measure used in determining the total quantity of waste described on each line.

- 3-Gallons (liquid only)
- 5-Pounds
- T-Tons (2000 lbs.)
- Y-Cubic yards
- L-Liters (liquid only)
- K-Kilograms
- M-Metric Tons (1000 kg)
- N-Cubic meters

**Item 15:** SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION-Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information, if any. If an alternate facility is designated, note it here. For INTERNATIONAL SHIPMENTS, generators must enter the point of departure (city & state) in the column. This column may also be used for emergency response telephone numbers, and any other information the generator is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and USDOT hazardous materials.

**Item 16:** GENERATOR'S CERTIFICATION-The Generator must read, sign (by hand) and date the certification. This must be done on the day the waste is placed on the waste shipment (date of receipt by transporter). If a mode other than highway is used, the word "highway" should be typed out and the appropriate mode (rail, water, air) inserted in the space. If another mode in addition to the highway mode is used, enter the appropriate mode(s) (e.g., "land rail") in this space.

**Item A:** STATE MANIFEST DOCUMENT NUMBER-Number generated by New Jersey except on the continuation sheets. Enter the number on each continuation sheet attached to a manifest.

**Item B:** STATE GEN ID -The State Generator ID to be entered on each addition of the waste generation site. If the mailing address and the site address are the same, enter "same".

**Item C:** STATE TRM ID-Enter the New Jersey State permit number. This must include both the transporter's permit number and the second number of the hazardous waste transport unit or hazardous waste vehicle which carries the waste. For rail shipments, enter the alpha numeric I.D. number assigned to the railcar in the second number.

**Item D:** TRANSPORTER PHONE-Enter a telephone number with area code where an authorized agent of the transporter can be reached.

**Item E:** STATE TRM ID-If applicable, enter the New Jersey State permit number of the waste carrying portion of the second transporter.

**Item F:** TRANSPORTER PHONE-If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.

**Item G:** STATE FACILITY'S ID-If entry is required by New Jersey.

**Item H:** FACILITY PHONE-Enter a telephone number with area code of the TSDF designated to receive the waste listed on this manifest.

**Item I:** WASTE NO.-Enter the waste number as it appears in N.J.A.C. 7:26G-5.1 et seq. (For example, 0001 is the waste number designated for purified water from T&T operations.) The proper waste number that accurately describes the shipment shall be determined according to the listing at 40 CFR 261.22.

**Item J:** ADDITIONAL SHIPPING AND HAZARDOUS MATERIALS LISTED ABOVE-Enter description of analysis for any waste listed above not on the manifest USDOT shipping description or has an h.o.s. designation. Enter a general description of the waste stream (i.e. groundwater contamination with metals and organics). Additionally, if any h.o.s. entry in Item 11 which does not conform to the requirement of 49 CFR 172.203(a) enter the two components, and their percentages, which most closely apply to the waste in the form of the mixture or solution. Enter the physical state (S = Solid, L = Liquid, G = Gas, SL = Slurry). EPA hazard codes (1 = Ignitable, C = Corrosive, R = Reactive, E = Toxic, F = Flammable, T = Toxic). Enter additional information as required by the manifest and regulatory code. C-720-G-3.2.

It is a violation by the transporter to transport waste from a generator who fails to properly complete the manifest, transporter liable to arrest under 17C-11, and failure to obtain the date and handwritten signature of the next hauler owner/transporter of the T&T unit is a violation.

**Item 17:** TRANSPORTER 1 SIGNATURE-Print or type the name of the person accepting the waste on behalf of the transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.

**Item 18:** TRANSPORTER 2 SIGNATURE-If applicable, follow instructions for Item 17 for the second transporter.

**NOTE:** ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.

**Item 19:** RECEIVING FACILITY'S CERTIFICATION-Print or type the name of the designated facility must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the reason for rejection of the rejected waste. Generators and operators of facilities located in New Jersey (i.e. within State) that report an out-of-state transfer from the U.S. EPA to the designated facility (i.e. out-of-state program) should contact their State agency for information on State Out-of-State Program requirements.

**Item 20:** FACILITY OWNER'S SIGNATURE-Print or type the name of the person receiving the waste on behalf of the owner/transporter of the designated TSDF. That person must acknowledge receipt of the waste described on the manifest by signing and entering the date of receipt.

**Item K:** HANDLING CODES-TYPE SHOULD COMPLETE-Enter the ultimate handling method utilized at the designated facility for each waste. Only the following codes may be used: Storage-S00 (containment); S01 (A); S02 (B); S03 (C); S04 (D); S05 (E); S06 (F); S07 (G); S08 (H); S09 (I); S10 (J); S11 (K); S12 (L); S13 (M); S14 (N); S15 (O); S16 (P); S17 (Q); S18 (R); S19 (S); S20 (T); S21 (U); S22 (V); S23 (W); S24 (X); S25 (Y); S26 (Z); S27 (AA); S28 (AB); S29 (AC); S30 (AD); S31 (AE); S32 (AF); S33 (AG); S34 (AH); S35 (AI); S36 (AJ); S37 (AK); S38 (AL); S39 (AM); S40 (AN); S41 (AO); S42 (AP); S43 (AQ); S44 (AR); S45 (AS); S46 (AT); S47 (AU); S48 (AV); S49 (AW); S50 (AX); S51 (AY); S52 (AZ); S53 (BA); S54 (BB); S55 (BC); S56 (BD); S57 (BE); S58 (BF); S59 (BG); S60 (BH); S61 (BI); S62 (BJ); S63 (BK); S64 (BL); S65 (BM); S66 (BN); S67 (BO); S68 (BP); S69 (BQ); S70 (BR); S71 (BS); S72 (BT); S73 (BU); S74 (BV); S75 (BW); S76 (BX); S77 (BY); S78 (BZ); S79 (CA); S80 (CB); S81 (CC); S82 (CD); S83 (CE); S84 (CF); S85 (CG); S86 (CH); S87 (CI); S88 (CJ); S89 (CK); S90 (CL); S91 (CM); S92 (CN); S93 (CO); S94 (CP); S95 (CQ); S96 (CR); S97 (CS); S98 (CT); S99 (CU); S00 (CV); S01 (CW); S02 (CX); S03 (CY); S04 (CZ); S05 (DA); S06 (DB); S07 (DC); S08 (DD); S09 (DE); S10 (DF); S11 (DG); S12 (DH); S13 (DI); S14 (DJ); S15 (DK); S16 (DL); S17 (DM); S18 (DN); S19 (DO); S20 (DP); S21 (DQ); S22 (DR); S23 (DS); S24 (DT); S25 (DU); S26 (DV); S27 (DW); S28 (DX); S29 (DY); S30 (DZ); S31 (EA); S32 (EB); S33 (EC); S34 (ED); S35 (EE); S36 (EF); S37 (EG); S38 (EH); S39 (EI); S40 (EJ); S41 (EK); S42 (EL); S43 (EM); S44 (EN); S45 (EO); S46 (EP); S47 (EQ); S48 (ER); S49 (ES); S50 (ET); S51 (EU); S52 (EV); S53 (EW); S54 (EX); S55 (EY); S56 (EZ); S57 (FA); S58 (FB); S59 (FC); S60 (FD); S61 (FE); S62 (FF); S63 (FG); S64 (FH); S65 (FI); S66 (FJ); S67 (FK); S68 (FL); S69 (FM); S70 (FN); S71 (FO); S72 (FP); S73 (FQ); S74 (FR); S75 (FS); S76 (FT); S77 (FU); S78 (FV); S79 (FW); S80 (FX); S81 (FY); S82 (FZ); S83 (GA); S84 (GB); S85 (GC); S86 (GD); S87 (GE); S88 (GF); S89 (GG); S90 (GH); S91 (GI); S92 (GJ); S93 (GK); S94 (GL); S95 (GM); S96 (GN); S97 (GO); S98 (GP); S99 (GQ); S00 (GR); S01 (GS); S02 (GT); S03 (GU); S04 (GV); S05 (GW); S06 (GX); S07 (GY); S08 (GZ); S09 (HA); S10 (HB); S11 (HC); S12 (HD); S13 (HE); S14 (HF); S15 (HG); S16 (HH); S17 (HI); S18 (HJ); S19 (HK); S20 (HL); S21 (HM); S22 (HN); S23 (HO); S24 (HP); S25 (HQ); S26 (HR); S27 (HS); S28 (HT); S29 (HU); S30 (HV); S31 (HW); S32 (HX); S33 (HY); S34 (HZ); S35 (IA); S36 (IB); S37 (IC); S38 (ID); S39 (IE); S40 (IF); S41 (IG); S42 (IH); S43 (II); S44 (IJ); S45 (IK); S46 (IL); S47 (IM); S48 (IN); S49 (IO); S50 (IP); S51 (IQ); S52 (IR); S53 (IS); S54 (IT); S55 (IU); S56 (IV); S57 (IW); S58 (IX); S59 (IY); S60 (IZ); S61 (JA); S62 (JB); S63 (JC); S64 (JD); S65 (JE); S66 (JF); S67 (JG); S68 (JH); S69 (JI); S70 (JJ); S71 (JK); S72 (JL); S73 (JM); S74 (JN); S75 (JO); S76 (JP); S77 (JQ); S78 (JR); S79 (JS); S80 (JT); S81 (JU); S82 (JV); S83 (JW); S84 (JX); S85 (JY); S86 (JZ); S87 (KA); S88 (KB); S89 (KC); S90 (KD); S91 (KE); S92 (KF); S93 (KG); S94 (KH); S95 (KI); S96 (KJ); S97 (KK); S98 (KL); S99 (KM); S00 (KN); S01 (KO); S02 (KP); S03 (KQ); S04 (KR); S05 (KS); S06 (KT); S07 (KU); S08 (KV); S09 (KW); S10 (KX); S11 (KY); S12 (KZ); S13 (LA); S14 (LB); S15 (LC); S16 (LD); S17 (LE); S18 (LF); S19 (LG); S20 (LH); S21 (LI); S22 (LJ); S23 (LK); S24 (LL); S25 (LM); S26 (LN); S27 (LO); S28 (LP); S29 (LQ); S30 (LR); S31 (LS); S32 (LT); S33 (LU); S34 (LV); S35 (LW); S36 (LX); S37 (LY); S38 (LZ); S39 (MA); S40 (MB); S41 (MC); S42 (MD); S43 (ME); S44 (MF); S45 (MG); S46 (MH); S47 (MI); S48 (MJ); S49 (MK); S50 (ML); S51 (MM); S52 (MN); S53 (MO); S54 (MP); S55 (MQ); S56 (MR); S57 (MS); S58 (MT); S59 (MU); S60 (MV); S61 (MW); S62 (MX); S63 (MY); S64 (MZ); S65 (NA); S66 (NB); S67 (NC); S68 (ND); S69 (NE); S70 (NF); S71 (NG); S72 (NH); S73 (NI); S74 (NJ); S75 (NK); S76 (NL); S77 (NM); S78 (NN); S79 (NO); S80 (NP); S81 (NQ); S82 (NR); S83 (NS); S84 (NT); S85 (NU); S86 (NV); S87 (NW); S88 (NX); S89 (NY); S90 (NZ); S91 (OA); S92 (OB); S93 (OC); S94 (OD); S95 (OE); S96 (OF); S97 (OG); S98 (OH); S99 (OI); S00 (OJ); S01 (OK); S02 (OL); S03 (OM); S04 (ON); S05 (OO); S06 (OP); S07 (OQ); S08 (OR); S09 (OS); S10 (OT); S11 (OU); S12 (OV); S13 (OW); S14 (OX); S15 (OY); S16 (OZ); S17 (PA); S18 (PB); S19 (PC); S20 (PD); S21 (PE); S22 (PF); S23 (PG); S24 (PH); S25 (PI); S26 (PJ); S27 (PK); S28 (PL); S29 (PM); S30 (PN); S31 (PO); S32 (PP); S33 (PQ); S34 (PR); S35 (PS); S36 (PT); S37 (PU); S38 (PV); S39 (PW); S40 (PX); S41 (PY); S42 (PZ); S43 (QA); S44 (QB); S45 (QC); S46 (QD); S47 (QE); S48 (QF); S49 (QG); S50 (QH); S51 (QI); S52 (QJ); S53 (QK); S54 (QL); S55 (QM); S56 (QN); S57 (QO); S58 (QP); S59 (QQ); S60 (QR); S61 (QS); S62 (QT); S63 (QU); S64 (QV); S65 (QW); S66 (QX); S67 (QY); S68 (QZ); S69 (RA); S70 (RB); S71 (RC); S72 (RD); S73 (RE); S74 (RF); S75 (RG); S76 (RH); S77 (RI); S78 (RJ); S79 (RK); S80 (RL); S81 (RM); S82 (RN); S83 (RO); S84 (RP); S85 (RQ); S86 (RR); S87 (RS); S88 (RT); S89 (RU); S90 (RV); S91 (RW); S92 (RX); S93 (RY); S94 (RZ); S95 (SA); S96 (SB); S97 (SC); S98 (SD); S99 (SE); S00 (SF); S01 (SG); S02 (SH); S03 (SI); S04 (SJ); S05 (SK); S06 (SL); S07 (SM); S08 (SN); S09 (SO); S10 (SP); S11 (SQ); S12 (SR); S13 (SS); S14 (ST); S15 (SU); S16 (SV); S17 (SW); S18 (SX); S19 (SY); S20 (SZ); S21 (TA); S22 (TB); S23 (TC); S24 (TD); S25 (TE); S26 (TF); S27 (TG); S28 (TH); S29 (TI); S30 (TJ); S31 (TK); S32 (TL); S33 (TM); S34 (TN); S35 (TO); S36 (TP); S37 (TQ); S38 (TR); S39 (TS); S40 (TT); S41 (TU); S42 (TV); S43 (TW); S44 (TX); S45 (TY); S46 (TZ); S47 (UA); S48 (UB); S49 (UC); S50 (UD); S51 (UE); S52 (UF); S53 (UG); S54 (UH); S55 (UI); S56 (UJ); S57 (UK); S58 (UL); S59 (UM); S60 (UN); S61 (UO); S62 (UP); S63 (UQ); S64 (UR); S65 (US); S66 (UT); S67 (UU); S68 (UV); S69 (UW); S70 (UX); S71 (UY); S72 (UZ); S73 (VA); S74 (VB); S75 (VC); S76 (VD); S77 (VE); S78 (VF); S79 (VG); S80 (VH); S81 (VI); S82 (VJ); S83 (VK); S84 (VL); S85 (VM); S86 (VN); S87 (VO); S88 (VP); S89 (VQ); S90 (VR); S91 (VS); S92 (VT); S93 (VU); S94 (VV); S95 (VW); S96 (VX); S97 (VY); S98 (VZ); S99 (WA); S00 (WB); S01 (WC); S02 (WD); S03 (WE); S04 (WF); S05 (WG); S06 (WH); S07 (WI); S08 (WJ); S09 (WK); S10 (WL); S11 (WM); S12 (WN); S13 (WO); S14 (WP); S15 (WQ); S16 (WR); S17 (WS); S18 (WT); S19 (WU); S20 (WV); S21 (WW); S22 (WX); S23 (WY); S24 (WZ); S25 (XA); S26 (XB); S27 (XC); S28 (XD); S29 (XE); S30 (XF); S31 (XG); S32 (XH); S33 (XI); S34 (XJ); S35 (XK); S36 (XL); S37 (XM); S38 (XN); S39 (XO); S40 (XP); S41 (XQ); S42 (XR); S43 (XS); S44 (XT); S45 (XU); S46 (XV); S47 (XW); S48 (XX); S49 (XY); S50 (XZ); S51 (YA); S52 (YB); S53 (YC); S54 (YD); S55 (YE); S56 (YF); S57 (YG); S58 (YH); S59 (YI); S60 (YJ); S61 (YK); S62 (YL); S63 (YM); S64 (YN); S65 (YO); S66 (YP); S67 (YQ); S68 (YR); S69 (YS); S70 (YT); S71 (YU); S72 (YV); S73 (YW); S74 (YX); S75 (YY); S76 (YZ); S77 (ZA); S78 (ZB); S79 (ZC); S80 (ZD); S81 (ZE); S82 (ZF); S83 (ZG); S84 (ZH); S85 (ZI); S86 (ZJ); S87 (ZK); S88 (ZL); S89 (ZM); S90 (ZN); S91 (ZO); S92 (ZP); S93 (ZQ); S94 (ZR); S95 (ZS); S96 (ZT); S97 (ZU); S98 (ZV); S99 (ZW); S00 (ZX); S01 (ZY); S02 (ZZ); S03 (AA); S04 (AB); S05 (AC); S06 (AD); S07 (AE); S08 (AF); S09 (AG); S10 (AH); S11 (AI); S12 (AJ); S13 (AK); S14 (AL); S15 (AM); S16 (AN); S17 (AO); S18 (AP); S19 (AQ); S20 (AR); S21 (AS); S22 (AT); S23 (AU); S24 (AV); S25 (AW); S26 (AX); S27 (AY); S28 (AZ); S29 (BA); S30 (BB); S31 (BC); S32 (BD); S33 (BE); S34 (BF); S35 (BG); S36 (BH); S37 (BI); S38 (BJ); S39 (BK); S40 (BL); S41 (BM); S42 (BN); S43 (BO); S44 (BP); S45 (BQ); S46 (BR); S47 (BS); S48 (BT); S49 (BU); S50 (BV); S51 (BW); S52 (BX); S53 (BY); S54 (BZ); S55 (CA); S56 (CB); S57 (CC); S58 (CD); S59 (CE); S60 (CF); S61 (CG); S62 (CH); S63 (CI); S64 (CJ); S65 (CK); S66 (CL); S67 (CM); S68 (CN); S69 (CO); S70 (CP); S71 (CQ); S72 (CR); S73 (CS); S74 (CT); S75 (CU); S76 (CV); S77 (CW); S78 (CX); S79 (CY); S80 (CZ); S81 (DA); S82 (DB); S83 (DC); S84 (DD); S85 (DE); S86 (DF); S87 (DG); S88 (DH); S89 (DI); S90 (DJ); S91 (DK); S92 (DL); S93 (DM); S94 (DN); S95 (DO); S96 (DP); S97 (DQ); S98 (DR); S99 (DS); S00 (DT); S01 (DU); S02 (DV); S03 (DW); S04 (DX); S05 (DY); S06 (DZ); S07 (EA); S08 (EB); S09 (EC); S10 (ED); S11 (EE); S12 (EF); S13 (EG); S14 (EH); S15 (EI); S16 (EJ); S17 (EK); S18 (EL); S19 (EM); S20 (EN); S21 (EO); S22 (EP); S23 (EQ); S24 (ER); S25 (ES); S26 (ET); S27 (EU); S28 (EV); S29 (EW); S30 (EX); S31 (EY); S32 (EZ); S33 (FA); S34 (FB); S35 (FC); S36 (FD); S37 (FE); S38 (FG); S39 (FH); S40 (FI); S41 (FJ); S42 (FK); S43 (FL); S44 (FM); S45 (FN); S46 (FO); S47 (FP); S48 (FQ); S49 (FR); S50 (FS); S51 (FU); S52 (FV); S53 (FW); S54 (FX); S55 (FY); S56 (FZ); S57 (GA); S58 (GB); S59 (GC); S60 (GD); S61 (GE); S62 (GF); S63 (GG); S64 (GH); S65 (GI); S66 (GJ); S67 (GK); S68 (GL); S69 (GM); S70 (GN); S71 (GO); S72 (GP); S73 (GQ); S74 (GR); S75 (GS); S76 (GT); S77 (GU); S78 (GV); S79 (GW); S80 (GX); S81 (GY); S82 (GZ); S83 (HA); S84 (HB); S85 (HC); S86 (HD); S87 (HE); S88 (HF); S89 (HG); S90 (HH); S91 (HI); S92 (HJ); S93 (HK); S94 (HL); S95 (HM); S96 (HN); S97 (HO); S98 (HP); S99 (HQ); S00 (HR); S01 (HS); S02 (HT); S03 (HU); S04 (HV); S05 (HW); S06 (HX); S07 (HY); S08 (HZ); S09 (IA); S10 (IB); S11 (IC); S12 (ID); S13 (IE); S14 (IF); S15 (IG); S16 (IH); S17 (II); S18 (IJ); S19 (IK); S20 (IL); S21 (IM); S22 (IN); S23 (IO); S24 (IP); S25 (IQ); S26 (IR); S27 (IS); S28 (IT); S29 (IU); S30 (IV); S31 (IW); S32 (IX); S33 (IY); S34 (IZ); S35 (JA); S36 (JB); S37 (JC); S38 (JD); S39 (JE); S40 (JF); S41 (JG); S42 (JH); S43 (JI); S44 (JJ); S45 (JK); S46 (JL); S47 (JM); S48 (JN); S49 (JO); S50 (JP); S51 (JQ); S52 (JR); S53 (JS); S54 (JT); S55 (JU); S56 (JV); S57 (JW); S58 (JX); S59 (JY); S60 (JZ); S61 (KA); S62 (KB); S63 (KC); S64 (KD); S65 (KE); S66 (KF); S67 (KG); S68 (KH); S69 (KI); S70 (KJ); S71 (KK); S72 (KL); S73 (KM); S74 (KN); S75 (KO); S76 (KP); S77 (KQ); S78 (KR); S79 (KS); S80 (KT); S81 (KU); S82 (KV); S83 (KW); S84 (KX); S85 (KY); S86 (KZ); S87 (LA); S88 (LB); S89 (LC); S90 (LD); S91 (LE); S92 (LF); S93 (LG); S94 (LH); S95 (LI); S96 (LJ); S97 (LK); S98 (LL); S99 (LM); S00 (LN); S01 (LO); S02 (LP); S03 (LQ); S04 (LR); S05 (LS); S06 (LT); S07 (LU); S08 (LV); S09 (LW); S10 (LX); S11 (LY); S12 (LZ); S13 (MA); S14 (MB); S15 (MC); S16 (MD); S17 (ME); S18 (MF); S19 (MG); S20 (MH); S21 (MI); S22 (MJ); S23 (MK); S24 (ML); S25 (MM); S26 (MN); S27 (MO); S28 (MP); S29 (MQ); S30 (MR); S31 (MS); S32 (MT); S33 (MU); S34 (MV); S35 (MW); S36 (MX); S37 (MY); S38 (MZ); S39 (NA); S40 (NB); S41 (NC); S42 (ND); S43 (NE); S44 (NF); S45 (NG); S46 (NH); S47 (NI); S48 (NJ); S49 (NK); S50 (NL); S51 (NM); S52 (NN); S53 (NO); S54 (NP); S55 (NQ); S56 (NR); S57 (NS); S58 (NT); S59 (NU); S60 (NV); S61 (NW); S62 (NX); S63 (NY); S64 (NZ); S65 (OA); S66 (OB); S67 (OC); S68 (OD); S69 (OE); S70 (OF); S71 (OG); S72 (OH); S73 (OI); S74 (OJ); S75 (OK); S76 (OL); S77 (OM); S78 (ON); S79 (OO); S80 (OP); S81 (OQ); S82 (OR); S83 (OS); S84 (OT); S85 (OU); S86 (OV); S87 (OW); S88 (OX); S89 (OY); S90 (OZ); S91 (PA); S92 (PB); S93 (PC); S94 (PD); S95 (PE); S96 (PF); S97 (PG); S98 (PH); S99 (PI); S00 (PJ); S01 (PK); S02 (PL); S03 (PM); S04 (PN); S05 (PO); S06 (PP); S07 (PQ); S08 (PR); S09 (PS); S10 (PT); S11 (PU); S12 (PV); S13 (PW); S14 (PX); S15 (PY); S16 (PZ); S17 (QA); S18 (QB); S19 (QC); S20 (QD); S21 (QE); S22 (QF); S23 (QG); S24 (QH); S25 (QI); S26 (QJ); S27 (QK); S28 (QL); S29 (QM); S30 (QN); S31 (QO); S32 (QP); S33 (QR); S34 (QS); S35 (QT); S36 (QU); S37 (QV); S38 (QW); S39 (QX); S40 (QY); S41 (QZ); S42 (RA); S43 (RB); S44 (RC); S45 (RD); S46 (RE); S47 (RF); S48 (RG); S49 (RH); S50 (RI); S51 (RJ); S52 (RK); S53 (RL); S54 (RM); S55 (RN); S56 (RO); S57 (RP); S58 (RQ); S59 (RR); S60 (RS); S61 (RT); S62 (RU); S63 (RV); S64 (RW); S65 (RX); S66 (RY); S67 (RZ); S68 (SA); S69 (SB); S70 (SC); S71 (SD); S72 (SE); S73 (SF); S74 (SG); S75 (SH); S76 (SI); S77 (SJ); S78 (SK); S79 (SL); S80 (SM); S81 (SN); S82 (SO); S83 (SP); S84 (SQ); S85 (SR); S86 (SS); S87 (ST); S88 (SU); S89 (SV); S90 (SW); S91 (SX); S92 (SY); S93 (SZ); S94 (TA); S95 (TB); S96 (TC); S97 (TD); 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S98 (XB); S99 (XC); S00 (XD); S01 (XE); S02 (XF); S03 (XG); S04 (XH); S05 (XI); S06 (XJ); S07 (XK); S08 (XL); S09 (XM); S10 (XN); S11 (XO); S12 (XP); S13 (XQ); S14 (XR

State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Hazardous Waste  
P.O. Box 174, Trenton, NJ 08625-0174



5303794

1. Generator Name US EPA Reg 11-Westwood Chemical Corp. Site 2890 Woodbridge Ave., Bldg.209, Edison, NJ 08837		2. Generator ID Number NJ 07 2 71 0 5 02 03 7 94		3. Manifest Number 1	
4. Generator Phone 908 420-4514 Attn: Dilshad Perera		5. State Trans. ID-NUDEP NJ 5303794		6. Site: Sect 15	
7. Transporter Name S+S Transportation		8. US EPA ID Number NJ 07 1 6 2 9 9 7 6		9. Decal No. 03212X 081658	
10. Transporter Phone 856 769-2741		11. State Trans. ID-NUDEP		12. Decal No.	
13. Shipper Name and Site Address E.I. DuPont de Nemours and Company Chambers Works - Route 130 Deepwater, NJ 08023		14. US EPA ID Number		15. State Trans. ID-NUDEP	
16. Shipper Phone NJ 02 02 38 5 7 30		17. State Trans. ID-NUDEP		18. Decal No.	
19. US DOT Description (including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) X RQ, Hazardous Waste, Liquid, N.O.S. 9, NA3082, 111 (Silver)		20. Containers No. Type		21. Total Quantity 4822XG	
22. Additional Description for Materials Listed Above A: App#OW10602 REL____ ERG 171		23. Hazardous Waste Labeling D 0 1 1		24. Waste No.	
25. Special Handling Instructions and Additional Information Job# ROAN-SSCH- Emergency Contact: Capitol Environmental Services (302) 652-8999 Site: 46 Tower Dr., Middletown, NY 10941		26. Tractor:		27. Trailer:	
28. Signature of Generator Representative DILSHAD J. PERERA		29. Signature of Transporter Representative Robert Lester		30. Date 11 04 05	

P.O. Box 414, Trenton, NJ 08625-0414

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

*Form Approved.*

OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST						1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of 9		Information in the shaded areas is not required by Federal law.							
3. Generator's Name and Mailing Address US EPA Reg 11-Hastwold Chemical Corp. Site 3800 Woodbridge Ave., Bldg. 209, Edison, NJ 08837										A. State Manifest Document Number <b>NJA 5303794</b>									
4. Generator's Phone ( 908 ) 422-4344										B. State Generator's ID-(Gen. Site Address) Site: West 15									
5. Transporter 1 Company Name										C. State Trans. ID-NJDEP									
6. US EPA ID Number										Decal No.-									
7. Transporter 2 Company Name										D. Transporter's Phone ( )									
8. US EPA ID Number										E. State Trans. ID-NJDEP									
9. Designated Facility Name and Site Address R.I. Infant on Monmouth and Company Chemical Works - Route 130 Freeport, NY 06023										F. Decal No.-									
10. US EPA ID Number										G. Transporter's Phone ( )									
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)										H. State Facility's ID									
HM										I. Facility's Phone ( 908 ) 340-3315									
a. 12. Containers										13. Total Quantity									
b. 1. Pararotone Waste Split, N.O.C. 2, 00001, 111 (Silver)										14. Unit Wt/Vol									
										I. Waste No.									
J. Additional Descriptions for Materials Listed Above										K. Handling Codes for Wastes Listed Above									
a. 1. 00001, 111 (Silver) 171										c.									
b.										d.									
15. Special Handling Instructions and Additional Information Emergency Contact: Capitol Environmental Services (202) 692-0000 Site: 46 Bowser Dr., Middletown, NY 13441										Tractor: Trailer:									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.																			
Printed/Typed Name DASHAD J. PERERA										Signature [Signature]									
Month Day Year 11/07/00																			
17. Transporter 1 Acknowledgement of Receipt of Materials																			
Printed/Typed Name										Signature									
Month Day Year																			
18. Transporter 2 Acknowledgement of Receipt of Materials																			
Printed/Typed Name										Signature									
Month Day Year																			
19. Discrepancy Indication Space																			
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.																			
Printed/Typed Name										Signature									
Month Day Year																			

**NJA 5303794**

## GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could make you subject to civil or criminal liabilities as specified in the New Jersey Hazardous Waste Regulations.

### INSTRUCTIONS-IMPORTANT:

#### READ ALL INSTRUCTIONS BEFORE COMPLETING

State & Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and if necessary the continuation sheet for both inter- and intrastate shipments. Continuation sheets may be purchased commercially and photocopied to provide copies as described below.

The New Jersey manifest contains 8 copies. **ALL COPIES MUST BE LEGIBLE.** This form is designed for use on a 12 pitch (elits) typewriter; a firm ball point pen may also be used only if you press down HARD. The 8 copies must be filed with the appropriate party as they are completed. **COPY DISTRIBUTION** is as follows:

- ORIGINAL:** **DESTINATION STATE-TSDF** must mail original to the state regulatory agency where the facility is located.
- COPY 2:** **GENERATOR STATE**-The TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3:** **GENERATOR COPY**-The TSDF mails this copy back to the generator of the waste.
- COPY 4:** **TSDF COPY**-TSDF keeps this copy for his records.
- COPY 5:** **TRANSPORTER COPY**-The transporter keeps this copy for his records.  
**NOTE:** If a *continuing transporter* is used the generator is responsible for supplying him with a legible photocopy, which must contain required signatures.
- COPY 6:** **DESTINATION STATE**-The generator mails this copy to the state regulatory agency where the designated facility (TSDF) is located.
- COPY 7:** **GENERATOR STATE**-The generator mails this copy to the state regulatory agency where the waste was generated.
- COPY 8:** **GENERATOR COPY**-the generator keeps this copy for his records.  
**ALL 8 COPIES MUST BE LEGIBLE**

### MANIFEST FORM ACQUISITION

- If the destination (consignment) state supplies a manifest & requires its use, then the generator is obligated to obtain the manifest from that state.
- If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest from the generator state.
- If neither the generator state or the consignment state supplies the manifest, then the generator may obtain the manifest from any source.

### GENERATOR SECTION

- Item 1:** **GENERATOR'S EPA ID NO.-MANIFEST DOCUMENT NO.**-Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest, for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2:** **PAGE 1 Of** Enter the total number of pages used to complete this manifest; i.e. the first page plus the number of continuation sheets, if any.
- Item 3:** **GENERATOR'S NAME & MAILING ADDRESS**-Enter the name (as notified to EPA) & mailing address of the generator. The address should be the location that will manage the returned manifest forms.
- Item 4:** **GENERATOR'S PHONE NUMBER**-Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5:** **TRANSPORTER 1 COMPANY NAME**-Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6:** **US EPA ID NUMBER**-Enter the EPA identification number of the first transporter identified in item 5.
- Item 7:** **TRANSPORTER 2 COMPANY NAME**-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste, if more than two (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8:** **US EPA ID NUMBER**-If a second transporter is used, enter the EPA identification number of the second transporter identified in item 7.
- Item 9:** **DESIGNATED FACILITY NAME & SITE ADDRESS**-Enter the company name and site address (as notified to the EPA) of the treatment, storage, or disposal facility (TSDF) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10:** **EPA ID NUMBER**-Enter the EPA identification number of the designated TSDF (or waste reuse facility) listed in item 9.
- Item 11:** **USDOT DESCRIPTION**-Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a n.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than 4 wastes are being shipped, a second manifest or continuation sheets should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12:** **CONTAINERS (NO. & TYPE)**-Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of container used:

**TABLE 1  
CONTAINER TYPES**

DM-Metal drums, barrels, kegs  
DW-Wooden drums, barrels, kegs  
DF-Fiberboard or plastic drums, barrels, kegs  
TP-Tanks portable  
TT-Cargo tanks (Tank trucks)  
TC-Tank cars  
DT-Dump truck  
CY-Cylinders  
CM-Metal boxes, cartons, cases (including roll-offs)  
CW-Wooden boxes, cartons, cases  
CF-Fiber or plastic boxes, cartons, cases  
BA-Burlap, cloth, paper/plastic bags

- Item 13:** **TOTAL QUANTITY**-Enter the total quantity of waste described on each line. **DO NOT USE FRACTIONS**
- Item 14:** **UNIT (Wt./Vol.)**-Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line.

**TABLE II  
UNITS OF MEASURE**

G-Gallons (liquids only)  
P-Pounds  
T-Tons (2000 lbs.)  
Y-Cubic yards  
L-Liters (liquids only)  
K-Kilogram  
M-Metric Tons (1000 kg)  
MC-Cubic meters

- Item 15:** **SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION**-Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information, if any. If an alternate facility is designated, note it here. For **INTERNATIONAL SHIPMENTS**, generators must enter the point of departure (city & state) in this space. This space may also be used for emergency response telephone numbers, and any other information the generator is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and USDOT hazardous materials.
- Item 16:** **GENERATOR'S CERTIFICATION**-The Generator must read, sign (by hand) and date the certification. This must be done the day the transporter picks up the waste shipment (date of receipt by transporter). If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, air) inserted in the space. If another mode in addition to the highway mode is used, indicate appropriate additional mode (e.g. "and rail") in this space.
- Item A:** **STATE MANIFEST DOCUMENT NUMBER**-Number preprinted by New Jersey except on the continuation sheets. Enter this number on each continuation sheet attached to a manifest.
- Item B:** **STATE GEN ID**-The State Generator ID is the street address of the waste generation site. If the mailing address and the site address are the same, enter "same".
- Item C:** **STATE TRANS ID**-Enter the New Jersey state permit number. This must include both the transporter's permit number and the decal number of the hazardous waste transport unit or hazardous waste vehicle which contains the waste. For rail shipment(s) enter the alpha numeric I.D. number assigned to the railcar in lieu of the decal number.
- Item D:** **TRANSPORTER PHONE**-Enter a telephone number with area code where an authorized agent of the transporter can be reached.
- Item E:** **STATE TRANS ID**-If applicable, enter the New Jersey State permit number of the waste carrying portion of the second vehicle.
- Item F:** **TRANSPORTER PHONE**-If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.
- Item G:** **STATE FACILITY'S ID**-No entry is required by New Jersey.
- Item H:** **FACILITY PHONE**-Enter a telephone number with area code of the TSDF designated to receive the waste listed on the manifest.
- Item I:** **HAZARD NO.**-Enter the 4-digit hazardous waste number as it appears in N.J.A.C. 7:26G-5.1 et seq. (for example "K017") is the waste number designated for pink/red water from TNT operations.) The proper waste number that accurately describes the shipment, shall be determined according to the hierarchy at N.J.A.C. 7:26G-3.2.
- Item J:** **ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE**-Enter description of analysis for any waste which does not have a complete USDOT shipping description or has an n.o.s. designation. Enter a general description of the waste stream. (i.e. groundwater contaminated with creosote and copper sulfate). Additionally, for any n.o.s. entry in item 11 which does not conform to the requirements at 49 CFR 172.203(K) enter the two components, and their percentages, which most predominantly contribute to the hazards of the mixture or solution. Enter the physical state (S = Solid, L = Liquid, G = Gas, SL = Sludge) EPA hazard codes (I = Ignitable, C = Corrosive, R = Reactive, E = Toxic, H = Acute Hazardous, T = Toxic). Enter additional information as required by the waste code hierarchy at N.J.A.C. 7:26G-6.2.

### TRANSPORTER SECTION

It is a violation by the transporter if he accepts hazardous waste from a generator who fails to properly complete the manifest, transports waste to an unauthorized facility, and/or fails to obtain the date and handwritten signature of the next hauler owner/operator of the TSD facility on the manifest.

- Item 17:** **TRANSPORTER 1 ACKNOWLEDGEMENT**-Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.
- Item 18:** **TRANSPORTER 2 ACKNOWLEDGEMENT**-If applicable, follow instructions for item 17 for the second transporter.
- NOTE:** **ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.**

### DESIGNATED FACILITY (TSDF) SECTION

- Item 19:** **DISCREPANCY INDICATION SPACE**-The authorized representative of the designated facility must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected wastes. Owners and operators of facilities located in authorized States (i.e., those States that received authorization from the U.S. EPA to administer the hazardous waste program) should contact their State agency for information on State Discrepancy Report requirements.
- Item 20:** **FACILITY OWNER/OPERATOR CERTIFICATION**-Print or type the name of the person receiving the waste on behalf of the owner/operator of the designated TSDF. That person must acknowledge receipt of the waste described on the manifest by signing and entering the date of receipt.
- Item K:** **HANDLING CODES-TSDF SHOULD COMPLETE**-Enter the ultimate handling method utilized at the designated facility for each waste. Only the following process codes may be used: Storage=S01 (contained); S02 (Tank); S04 (Surface Impoundment); S05 (Other-specify); Treatment=T01 (Turbid); T02 (Biosolids Impoundment); T03 (Incinerator); T04 (Other-specify); Disposal=D79 (Injection Well); D80 (Landfill); D81 (Land Application); D82 (Ocean Disposal); D83 (Surface Impoundment); D84 (Other-specify).
- \*NOTE** For interstate shipments you may be required to comply with the manifesting requirements of both the consignment and generator states regarding the completion of specific information included in listed items A-K. Please check with both generator and consignment states for specific requirements. New Jersey requires that all information be filled in except for item "G".

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimates including suggestions for reducing this burden, to: Chief Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.



DuPont Environmental Treatment

## Notification and Certification Form

OW/DW No. OW10502

Release No. \_\_\_\_\_

(Please fill in)

## Chambers Works Wastewater Treatment Facility Land Disposal Restrictions

1. Generator's EPA ID No. NYD 072 710 502

Hazardous Waste Manifest No. \_\_\_\_\_

Generator US EPA Reg II-Westwood Chemical Corp.Generators Address 46 Tower Drive,

Manifest Page No./Line Letter \_\_\_\_\_

Middletown, NY 10941

(for drummed aqueous waste only)

Note: The DuPont Chambers Works Wastewater Treatment Plan (WWTP) is regulated under the Clean Water Act.

2. Is waste analysis information attached? ☐ Yes ☒ Not Available

3. In Table A, check (if applicable) the characteristic U.S. EPA hazardous waste codes that apply to this waste. For each waste code checked, identify whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed based on the options found on page 2.

TABLE A

Check Waste Code	U.S. EPA Hazardous Waste Code	Subcategory	Waste-water*	Non-Waste-water*	How must the waste be managed?
			(Check only one)		(Enter the letter from page 2)
<input type="checkbox"/>	D001	Low TOC (<10% TOC)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D001	High TOC (≥ 10% TOC)	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D001	Oxidizer	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Acid (pH ≤ 2)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Alkaline (pH ≥ 12.5)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Other Corrosives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Sulfides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Cyanides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Water reactive	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Explosives (pretreated)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Other reactives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D004	Arsenic	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D005	Barium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D006	Cadmium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D007	Chromium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D008	Lead	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D009	Mercury	<input type="checkbox"/>	NA	
<input type="checkbox"/>	D009	Low Mercury <260 mg/kg HG	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D010	Selenium	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	D011	Silver	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A

\*Wastewaters contain &lt;1% TOC and &lt;1% TSS&gt;

**Chambers Works Wastewater Treatment Facility Land Disposal Restrictions (cont.)**

4. In Table B, identify all additional characteristic, listed, newly identified, and newly listed U.S. EPA hazardous waste codes that apply to this waste. For each waste code, identify the subcategory, indicate whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed, based on the options below.

**TABLE B**

U.S. EPA Hazardous Waste Code(s) Per 40 CFR 261	Subcategory		Waste- water*	Non- Waste- water*	How must the waste be managed? Enter the letter from options below*
			(Check only one)		
	Description	None			
D011		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

5. If this waste is a spent solvent (F001-F005), you **MUST** include Attachment II, Treatment Standards for F001-F005 Spent Solvents.
6. If this waste is a multisource Leachate (F039), you may include Attachment III, Treatment Standards for F039 Multisource Leachate Wastes.
7. If this waste is characteristically hazardous, you may include attachment IV, Universal Treatment Standards. You may also include Attachment IV for nonhazardous waste which was characteristically hazardous as generated but rendered nonhazardous by pretreatment.

**\*HOW MUST THE WASTE BE MANAGED?** (Choose from the following options to complete Tables A and B.)

A. Restricted waste requires treatment [40 CFR 268.7(a)(2)].

B. Restricted waste meets applicable treatment standards.

**GENERATOR'S CERTIFICATION** [40 CFR 268.7(a)(3)(i)]

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR 268 Subpart D. I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

C. Waste is newly listed or newly identified.

D. Restricted waste is exempt from the Land Disposal Restrictions. Check the reason below and write in the date the waste is subject to prohibitions [40 CFR 268.7(a)(4)].

☐ The waste has been granted a Site-Specific Variance.

☐ The waste has been given a Case-by-Case Extension.

☐ The waste is subject to a National Capacity Variance.

E. Restricted waste has been pretreated to remove the hazardous characteristic and requires treatment of underlying hazardous constituents.

**CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS** [40 CFR 268.7(b)(4)(iv)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.


F. Restricted waste has been pretreated on-site to remove the hazardous characteristic and to treat underlying hazardous constituents to levels in 40 CFR 268.48 Universal Treatment Standards.

**CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS** [40 CFR 268.7(b)(4)(v)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic, and that underlying hazardous constituents, as defined in §268.2(i), have been treated on-site to meet the §268.48 Universal Treatment Standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

**CERTIFICATION**

I certify that, to the best of my knowledge, the information provided in this document is true, accurate, and complete.

  
Authorized Signature

CHAMBERS COORDINATOR  
Title

11-04-05  
Date

TRACTOR # 1104TRAILER # TV224DRIVER : ROBERT LESTER

SJ TRANSPORTATION CO., INC.

1176 U.S. ROUTE 40

P.O. BOX 153

WOODSTOWN, NJ 08058

(856) 769-2741

WWW.SJTRANSPORTATION.COM

ORDER # 15752

PRINTED 11/3/2005

BOOKED BY VELDE

SHIPPER:

CONSIGNEE:

MANIFEST # \_\_\_\_\_

DUSEMID 1 US EPA REG. II W

46 TOWER DR.

MIDDLETOWN, NY 10941

DUPDEE 1 DUPONT

CHAMBERWORKS, R

DEEPWATER, NJ 08023

DAVE BOFINGER

(845) 692-9861

BRENDA SIMMONS

(856) 540-2269

NJ0002385730

TRAILER TYPE: TVAC

PICKUP DATE 11/4/2005

DELIVER DATE 11/4/2005

GROSS WT \_\_\_\_\_

UNIT:

TIME 7:30:00 AM

TIME 12:00:00 PM

TARE WT \_\_\_\_\_

IN # 224 OUT # 224IN 7A OUT 08

IN \_\_\_\_\_

OUT \_\_\_\_\_

NET WT \_\_\_\_\_

COMMENTS (EXPLAIN DELAY AND DISCREPANCIES):

COMMENTS (EXPLAIN DELAY AND DISCREPANCIES):

DESCRIPTION:

GAL LOAD 4872

ORDER REF #'S:

OW# \_\_\_\_\_

60" Wet

SPECIAL INSTRUCTIONS:

VAC FROM FRAC TANK

BILL TO:

VACUUM YES ☒ VACUUM NO \_\_\_\_\_VACUUM START 0750VACUUM FINISH 0820

CONTACT : VICKI 302-652-8999 X 101

CAPITOL ENVIRON

115 C TROLLEY 90

WILMINGTON, DE 19806

I, THE UNDERSIGNED, CERTIFY THE LISTED INFORMATION AND DEMURRAGE TIME AND IS TRUE AND COMPLETE.

SHIPPER Robert Lester FLEET DATE 11-4-05

CONSIGNEE \_\_\_\_\_ DATE \_\_\_\_\_

PERSONNEL ARE AVAILABLE 24 HOURS/DAY WITH KNOWLEDGE OF THE HAZARDS OF THE CARRIER: SJ TRANSPORTATION CO., INC. (800) 624-2552  
MATERIAL AND EMERGENCY RESPONSE INFORMATION OR WHO HAS ACCESS TO A PERSON PER: Robert Lester  
WITH THAT KNOWLEDGE. DATE: 11/4/05

WHITE COPY - S-J, YELLOW COPY - DRIVER, PINK COPY - TDRF, GOLD COPY - CUSTOMER



State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Manifest Section  
P.O. Box 414, Trenton, NJ 08625-0414

10502  
4

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved.

OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address <b>US EPA Reg 11-Westwood Chemical Corp. Site 2890 Woodbridge Ave., Bldg. 209, Edison, NJ 08837</b>						A. State Manifest Number <b>NJA 5303794</b>				
4. Generator's Phone ( 908 ) 420-4514 Attn: Dillshad Perera						B. State Generator's ID (Gen. Site Address) <b>Site: Sect 15</b>				
5. Transporter 1 Company Name <b>SJS Transportation</b>						C. State Trans. ID-NJDEP <b>032117X</b>				
6. US EPA ID Number <b>NJ010711629976</b>						Decal No.- <b>0811658</b>				
7. Transporter 2 Company Name						D. Transporter's Phone ( 856 ) 769-2741				
8. US EPA ID Number						E. State Trans. ID-NJDEP				
9. Designated Facility Name and Site Address <b>E.I. DuPont de Nemours and Company Chambers Works - Route 130 Deepwater, NJ 08023</b>						Decal No.-				
10. US EPA ID Number <b>NJ0101023615730</b>						F. Transporter's Phone ( )				
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) <b>HM</b>						12. Containers		13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. <b>X</b> <b>RD, Hazardous Waste Liquid, N.O.S. 9, NA3002, 111 (Silver)</b>						No. <b>001</b> Type <b>TR</b>		<b>41872X</b>	<b>G</b>	<b>01011</b>
b.										
c.										
d.										
J. Additional Descriptions for Materials Listed Above <b>A: App#OW10502 REL 4 BRG 171</b>						K. Handling Codes for Wastes Listed Above <b>T C 1</b>				
a.						a.				
b.						b.				
c.						c.				
d.						d.				
15. Special Handling Instructions and Additional Information <b>Job# ROAN-SSCH- Tractor: Emergency Contact: Capitol Environmental Services (302) 652-8999 Site: 46 Tower Dr., Middletown, NY 10941</b>										
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.										
Printed/Typed Name <b>DILSHAD J. PERERA</b>						Signature <i>[Signature]</i>			Month Day Year <b>11/10/15</b>	
17. Transporter 1 Acknowledgement of Receipt of Materials										
Printed/Typed Name <b>Robert Lester</b>						Signature <i>[Signature]</i>			Month Day Year <b>11/10/15</b>	
18. Transporter 2 Acknowledgement of Receipt of Materials										
Printed/Typed Name						Signature			Month Day Year	
19. Discrepancy Indication Space <b>IRM - MATERIALS RECEIVED FROM 11/5/16.</b>										
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.										
Printed/Typed Name <b>ROBERT MILLS</b>						Signature <i>[Signature]</i>			Month Day Year <b>11/10/15</b>	







State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Manifest Section  
P.O. Box 414, Trenton, NJ 08625-0414



5303795

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved

OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. NY D0 7 2 71 05 02 0 3 79 5		Manifest Document No. 0 3 79 5		2. Page 1 of 1		information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address US EPA Reg 11-Westwood Chemical Corp. Site 2890 Woodbridge Ave., Bldg.209, Edison, NJ 08837						A. State Manifest Document Number <b>NJA 5303795</b>							
4. Generator's Phone 1 908 420-4514 Attn: Dilshad Perera						B. State Generator's ID (Gen. Site Address) Site: Sect 15							
5. Transporter 1 Company Name ST TRANSPORTATION Co Inc						C. State Trans. ID-NJDEP X 0 3 2 1 7							
6. US EPA ID Number NJ D0 7 1 6 2 9 9 7 6						Decal No. 0 8 1 6 8 1							
7. Transporter 2 Company Name						D. Transporter's Phone ( 856 ) 769-2741							
8. US EPA ID Number						E. State Trans. ID-NJDEP							
9. Designated Facility Name and Site Address E.I.DuPont de Nemours and Company Chambers Works - Route 130 Deepwater, NJ 08023						Decal No.							
10. US EPA ID Number NJ D 00 2 3 85 73 0						F. Transporter's Phone ( )							
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) a. X RQ, Hazardous Waste, Liquid, N.O.S. 9, NA3082, 111 (Silver)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
						01 01 TT		X 5 1 0 0 G		D 0 1 1 1			
J. Additional Descriptions for Materials Listed Above A: App#OW10602 REL ___ ERC 171						K. Handling Codes for Wastes Listed Above							
a.						a.		c.					
b.						b.		d.					
15. Special Handling Instructions and Additional Information Job# ROAN-SSCH- Tractor: Emergency Contact: Capitol Environmental Services (302)652-8999 Site: 46 Tower Dr., Middletown, NY 10941													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name DILSHAD J. PERERA						Signature <i>[Signature]</i>						Month Day Year 11 04 05	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name MERLE L. McDowell						Signature <i>[Signature]</i>						Month Day Year 11 04 05	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name						Signature						Month Day Year	
19. Discrepancy Indication Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name													
Signature													

SIGNATURE AND INFORMATION MUST BE

NJA 5303795



State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Manifest Section  
P.O. Box 414, Trenton, NJ 08625-0414

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved.

OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NY 100 17 2 77 05 00 0 2 79 15		Manifest Document No. 0 2 79 15		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address 55 EPA Reg II-Scottwood Chemical Corp. Site 2880 Woodbridge Ave., Bldg. 205, Edison, NJ 08807						A. State Manifest Document Number <b>NJA 5303795</b>							
4. Generator's Phone ( 800 ) 420-4514 Attn: Dilshad Parera						B. State Generator's ID-(Gen. Site Address) NJ 201 201 17							
5. Transporter 1 Company Name Dilshad Parera						6. US EPA ID Number 17 05 00 0 2 79 15							
7. Transporter 2 Company Name						8. US EPA ID Number							
9. Designated Facility Name and Site Address S.I. Support to Imports and Company Chubb's Forks - Route 130 Trenton, NJ 08625						10. US EPA ID Number							
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. 17, Hazardous Waste, Liquid, P.O.S. 0, HAZWASTE, III (Silver)						01 01 12		15 19 0		5		0 1 1 1	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above 17 05 00 0 2 79 15 001 171						K. Handling Codes for Wastes Listed Above							
a.						c.		a.		c.			
b.						d.		b.		d.			
15. Special Handling Instructions and Additional Information Job# 8041-8801 Emergency Contact: Capital Environmental Services (302) 492-1030 Site: 41 Tower Dr., Middletown, NJ 08841													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name DILSHAD J. PERERA						Signature [Signature] Month Day Year 11 19 95							
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name Dilshad Parera						Signature [Signature] Month Day Year 11 19 95							
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name						Signature Month Day Year							
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name						Signature Month Day Year							

NJA 5303795

## GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could make you subject to civil or criminal liabilities as specified in the New Jersey Hazardous Waste Regulations.

### INSTRUCTIONS-IMPORTANT:

#### READ ALL INSTRUCTIONS BEFORE COMPLETING

State & Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and if necessary the continuation sheet for both inter- and intrastate shipments. Continuation sheets may be purchased commercially and photocopied to provide copies as described below.

The New Jersey manifest contains 8 copies. **ALL COPIES MUST BE LEGIBLE.** This form is designed for use on a 12 pitch (elite) typewriter; a firm ball point pen may also be used only if you press down HARD. The 8 copies must be filed with the appropriate party as they are completed. **COPY DISTRIBUTION** is as follows:

- ORIGINAL:** **DESTINATION STATE-TSDF** must mail original to the state regulatory agency where the facility is located.
- COPY 2:** **GENERATOR STATE**-The TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3:** **GENERATOR COPY**-The TSDF mails this copy back to the generator of the waste.
- COPY 4:** **TSDF COPY**-TSDF keeps this copy for his records.
- COPY 5:** **TRANSPORTER COPY**-The transporter keeps this copy for his records.
- NOTE:** If a *continuing transporter* is used the generator is responsible for supplying him with a legible photocopy, which must contain required signatures.
- COPY 6:** **DESTINATION STATE**-The generator mails this copy to the state regulatory agency where the designated facility (TSDF) is located.
- COPY 7:** **GENERATOR STATE**-The generator mails this copy to the state regulatory agency where the waste was generated.
- COPY 8:** **GENERATOR COPY**-the generator keeps this copy for his records.
- ALL 8 COPIES MUST BE LEGIBLE**

### MANIFEST FORM ACQUISITION

- If the destination (consignment) state supplies a manifest & requires its use, then the generator is obligated to obtain the manifest from that state.
- If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest from the generator state.
- If neither the generator state or the consignment state supplies the manifest, then the generator may obtain the manifest from any source.

### GENERATOR SECTION

- Item 1:** **GENERATOR'S EPA ID NO.-MANIFEST DOCUMENT NO.**-Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest, for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2:** **PAGE 1 OF** Enter the total number of pages used to complete this manifest; i.e. the first page plus the number of continuation sheets, if any.
- Item 3:** **GENERATOR'S NAME & MAILING ADDRESS**-Enter the name (as notified to EPA) & mailing address of the generator. The address should be the location that will manage the returned manifest forms.
- Item 4:** **GENERATOR'S PHONE NUMBER**-Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5:** **TRANSPORTER 1 COMPANY NAME**-Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6:** **US EPA ID NUMBER**-Enter the EPA identification number of the first transporter identified in item 5.
- Item 7:** **TRANSPORTER 2 COMPANY NAME**-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste, if more than two (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8:** **US EPA ID NUMBER**-If a second transporter is used, enter the EPA identification number of the second transporter identified in item 7.
- Item 9:** **DESIGNATED FACILITY NAME & SITE ADDRESS**-Enter the company name and site address (as notified to the EPA) of the treatment, storage, or disposal facility (TSDF) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10:** **EPA ID NUMBER**-Enter the EPA identification number of the designated TSDF (or waste reuse facility) listed in item 9.
- Item 11:** **USDOT DESCRIPTION**-Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a n.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than 4 wastes are being shipped, a second manifest or continuation sheets should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12:** **CONTAINERS (NO. & TYPE)**-Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of container used:

**TABLE 1  
CONTAINER TYPES**

DM-Metal drums, barrels, kegs  
DW-Wooden drums, barrels, kegs  
DF-Fiberboard or plastic drums, barrels, kegs  
TP-Tanks portable  
TT-Cargo tanks (Tank trucks)  
TC-Tank cars  
DT-Dump truck  
CY-Cylinders  
CM-Metal boxes, cartons, cases (including roll-offs)  
CW-Wooden boxes, cartons, cases  
CF-Fiber or plastic boxes, cartons, cases  
BA-Burlap, cloth, paper/plastic bags

- Item 13:** **TOTAL QUANTITY**-Enter the total quantity of waste described on each line. **DO NOT USE FRACTIONS**
- Item 14:** **UNIT (ML/VOL)**-Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line.

**TABLE I  
UNIT OF MEASURE**

G-Gallons (liquids only)  
P-Pounds  
T-Tons (2000 lbs.)  
Y-Cubic yards  
L-Liters (liquids only)  
K-Kilograms  
M-Metric Tons (1000 kg)  
m-Cubic meters

- Item 15:** **SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION**-Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information. If any of an alternate facility is designated, note it here. For **INTERNATIONAL SHIPMENTS**, generators must enter the point of departure (city & state) in this space. This space may also be used for emergency response telephone numbers and any other information the generator is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and USDOT hazardous materials.
- Item 13:** **GENERATOR'S CERTIFICATION**-The Generator must read, sign (by hand) and date the certification. This must be done the day the transporter picks up the waste shipment (date of receipt by transporter). If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, air) inserted in this space. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g. "land rail") in this space.
- Item A:** **STATE MANIFEST DOCUMENT NUMBER**-Number preprinted by New Jersey except on the continuation sheets. Enter this number on each continuation sheet attached to a manifest.
- Item B:** **STATE GEN ID**-The State Generator ID is the street address of the waste generation site. If the mailing address and the site address are the same, enter "same".
- Item C:** **STATE TRAN ID**-Enter the New Jersey state permit number. This must include both the transporter's permit number and the fiscal number of the hazardous waste transport unit or hazardous waste vehicle which contains the waste. For rail shipment(s) enter the alpha numeric I.D. number preprinted on the railcar in lieu of the fiscal number.
- Item D:** **TRANSPORTER PHONE**-Enter a telephone number with area code where an authorized agent of the transporter can be reached.
- Item E:** **STATE TRAN ID**-If applicable, enter the New Jersey State permit number of the waste carrying portion of the second vehicle.
- Item F:** **TRANSPORTER PHONE**-If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.
- Item G:** **STATE FACILITY ID**-No entry is required by New Jersey.
- Item H:** **FACILITY PHONE**-Enter a telephone number with area code of the TSDF designated to receive the waste listed on the manifest.
- Item I:** **WASTE NO.**-Enter the 4 digit hazardous waste number as it appears in N.J.A.C. 7:26G-5.1 et seq. (For example 1007 is the waste number designated for pink/red water from TNT operations.) The proper waste number must accurately describe the shipment, shall be determined according to the hierarchy at N.J.A.C. 7:26G-5.2.
- Item J:** **ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE**-Enter description of analysis for any waste which does not have a complete USDOT shipping description or has an n.o.s. designation. Enter a general description of the waste stream. (i.e. groundwater contaminated with creosote and copper sulfate). Additionally, for any n.o.s. entry in item 11 which does not conform to the requirements at 49 CFR 172.203(K) enter the two components, and their percentages, which most predominantly contribute to the hazards of the mixture or solution. Enter the physical state (S = Solid, L = Liquid, G = Gas, SL = Sludge) EPA hazard codes (I = Ignitable, C = Corrosive, R = Reactive, X = TCLP, H = Acute Hazardous, T = Toxic). Enter additional information as required by the waste code hierarchy at N.J.A.C. 7:26G-6.2.

### TRANSPORTER SECTION

It is a violation by the transporter if he accepts hazardous waste from a generator who fails to properly complete the manifest, transports waste to an unauthorized facility, and/or fails to obtain the date and handwritten signature of the next hauler/owner/operator of the TSDF facility on the manifest.

- Item 17:** **TRANSPORTER 1 ACKNOWLEDGEMENT**-Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.
- Item 18:** **TRANSPORTER 2 ACKNOWLEDGEMENT**-If applicable, follow instructions for item 17 for the second transporter.
- NOTE:** **ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.**

### DESIGNATED FACILITY (TSDF) SECTION

- Item 19:** **DISCREPANCY INFORMATION SPACE**-The authorized representative of the designated facility must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected wastes. Owners and operators of facilities located in authorized States (i.e. those States that received authorization from the U.S. EPA to administer the hazardous waste program) should contact their State agency for information on State Discrepancy Report requirements.
- Item 20:** **FACILITY OWNER/OPERATOR CERTIFICATION**-Print or type the name of the person receiving the waste on behalf of the owner/operator of the designated TSDF. That person must acknowledge receiving the waste described on the manifest by signing and entering the date of receipt.
- Item K:** **HANDLING CODES-TSDF SHOULD COMPLETE**-Enter the ultimate handling method utilized at the designated facility for each waste. Only the following process codes may be used: Storage-S01 (containers); S02 (Tank); S03 (Surface Impoundment); S05 (Other-specify); Treatment-T01 (Tank); T02 (Surface Impoundment); T03 (Incineration); T04 (Other-specify); Disposal-D01 (Incineration); D02 (Land Application); D03 (Land Application); D04 (Land Application); D05 (Land Application); D06 (Land Application); D07 (Land Application); D08 (Land Application); D09 (Land Application); D10 (Land Application); D11 (Land Application); D12 (Land Application); D13 (Land Application); D14 (Land Application); D15 (Land Application); D16 (Land Application); D17 (Land Application); D18 (Land Application); D19 (Land Application); D20 (Land Application); D21 (Land Application); D22 (Land Application); D23 (Land Application); D24 (Land Application); D25 (Land Application); D26 (Land Application); D27 (Land Application); D28 (Land Application); D29 (Land Application); D30 (Land Application); D31 (Land Application); D32 (Land Application); D33 (Land Application); D34 (Land Application); D35 (Land Application); D36 (Land Application); D37 (Land Application); D38 (Land Application); D39 (Land Application); D40 (Land Application); D41 (Land Application); D42 (Land Application); D43 (Land Application); D44 (Land Application); D45 (Land Application); D46 (Land Application); D47 (Land Application); D48 (Land Application); D49 (Land Application); D50 (Land Application); D51 (Land Application); D52 (Land Application); D53 (Land Application); D54 (Land Application); D55 (Land Application); D56 (Land Application); D57 (Land Application); D58 (Land Application); D59 (Land Application); D60 (Land Application); D61 (Land Application); D62 (Land Application); D63 (Land Application); D64 (Land Application); D65 (Land Application); D66 (Land Application); D67 (Land Application); D68 (Land Application); D69 (Land Application); D70 (Land Application); D71 (Land Application); D72 (Land Application); D73 (Land Application); D74 (Land Application); D75 (Land Application); D76 (Land Application); D77 (Land Application); D78 (Land Application); D79 (Land Application); D80 (Land Application); D81 (Land Application); D82 (Land Application); D83 (Land Application); D84 (Land Application); D85 (Land Application); D86 (Land Application); D87 (Land Application); D88 (Land Application); D89 (Land Application); D90 (Land Application); D91 (Land Application); D92 (Land Application); D93 (Land Application); D94 (Land Application); D95 (Land Application); D96 (Land Application); D97 (Land Application); D98 (Land Application); D99 (Land Application); D00 (Land Application).
- NOTE:** For interstate shipment you may be required to comply with the manifesting requirements of both the continuation and generator states regarding the completion of specific information included in referred items A-K. Please check with both generator and consignment states for specific requirements. New Jersey requires that all information be filled in except for item "G".

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimates including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.



DuPont Environmental Treatment

## Notification and Certification Form

OW/DW No. OW10502

Release No. \_\_\_\_\_

(Please fill in)

## Chambers Works Wastewater Treatment Facility Land Disposal Restrictions

1. Generator's EPA ID No. NYD 072 710 502

Hazardous Waste Manifest No. \_\_\_\_\_

Generator US EPA Reg II-Westwood Chemical Corp.Generators Address 46 Tower Drive,

Manifest Page No./Line Letter \_\_\_\_\_

Middletown, NY 10941

(for drummed aqueous waste only)

Note: The DuPont Chambers Works Wastewater Treatment Plan (WWTP) is regulated under the Clean Water Act.

2. Is waste analysis information attached? ☐ Yes ☒ Not Available

3. In Table A, check (if applicable) the characteristic U.S. EPA hazardous waste codes that apply to this waste. For each waste code checked, identify whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed based on the options found on page 2.

TABLE A

Check Waste Code	U.S. EPA Hazardous Waste Code	Subcategory	Waste-water*	Non-Waste-water*	How must the waste be managed?
			(Check only one)		(Enter the letter from page 2)
<input type="checkbox"/>	D001	Low TOC (<10% TOC)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D001	High TOC ( 10% TOC)	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D001	Oxidizer	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Acid (pH ...2)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Alkaline (pH 12.5)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Other Corrosives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Sulfides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Cyanides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Water reactive	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Explosives (pretreated)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Other reactives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D004	Arsenic	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D005	Barium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D006	Cadmium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D007	Chromium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D008	Lead	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D009	Mercury	<input type="checkbox"/>	NA	
<input type="checkbox"/>	D009	Low Mercury <260 mg/kg HG	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D010	Selenium	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	D011	Silver	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A

\*Wastewaters contain &lt;1% TOC and &lt;1% TSS&gt;

# Chambers Works Wastewater Treatment Facility Land Disposal Restrictions (cont.)

4. In Table B, identify all additional characteristic, listed, newly identified, and newly listed U.S. EPA hazardous waste codes that apply to this waste. For each waste code, identify the subcategory, indicate whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed, based on the options below.

TABLE B

U.S. EPA Hazardous Waste Code(s) Per 40 CFR 261	Subcategory		Waste- water*	Non- Waste- water*	How must the waste be managed? Enter the letter from options below*
			(Check only one)		
	Description	None			
D011		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

5. If this waste is a spent solvent (F001-F005), you **MUST** include Attachment II, Treatment Standards for F001-F005 Spent Solvents.
6. If this waste is a multisource Leachate (F039), you may include Attachment III, Treatment Standards for F039 Multisource Leachate Wastes.
7. If this waste is characteristically hazardous, you may include attachment IV, Universal Treatment Standards. You may also include Attachment IV for nonhazardous waste which was characteristically hazardous as generated but rendered nonhazardous by pretreatment.

**\*HOW MUST THE WASTE BE MANAGED?** (Choose from the following options to complete Tables A and B.)

A. Restricted waste requires treatment [40 CFR 268.7(a)(2)].

B. Restricted waste meets applicable treatment standards.

GENERATOR'S CERTIFICATION (40 CFR 268.7(a)(3)(i))

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR 268 Subpart D. I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

C. Waste is newly listed or newly identified.

D. Restricted waste is exempt from the Land Disposal Restrictions. Check the reason below and write in the date the waste is subject to prohibitions [40 CFR 268.7(a)(4)].

☐ The waste has been granted a Site-Specific Variance.

☐ The waste has been given a Case-by-Case Extension.

☐ The waste is subject to a National Capacity Variance.

E. Restricted waste has been pretreated to remove the hazardous characteristic and requires treatment of underlying hazardous constituents.

CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR 268.7(b)(4)(iv)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

F. Restricted waste has been pretreated on-site to remove the hazardous characteristic and to treat underlying hazardous constituents to levels in 40 CFR 268.48 Universal Treatment Standards.

CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR 268.7(b)(4)(v)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic, and that underlying hazardous constituents, as defined in §268.2(i), have been treated on-site to meet the §268.48 Universal Treatment Standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

## CERTIFICATION

I certify that, to the best of my knowledge, the information provided in this document is true, accurate, and complete.

DILSHAD J. PERERA

Authorized Signature

ON-SCENE COORDINATOR

Title

11-04-05

Date



TRACTOR # 5

TRAILER # LTV-238

DRIVER : MERLE MCDOWELL

SJ TRANSPORTATION CO., INC.

1176 U.S. ROUTE 40

P.O. BOX 169

WOODSTOWN, NJ 08098

(856) 769-2741

WWW.SJTRANSPORTATION.COM

ORDER # 15754

PRINTED 11/3/2005

BOOKED BY KELDE

MANIFEST # NA-5303795

SHIPPER:

CONSIGNEE:

EUSEMID I US EPA REG. II W  
46 TOWER DR.  
MIDDLETOWN, NY 10941

DAVE BOFINGER  
(845) 692-9861

DUPDEE J DUPONT  
CHAMBERWORKS, R  
DEEPWATER, NJ 08023

BRENDA SIMMONS  
(856) 540-2269

NJD002385730

TRAILER TYPE: TVAC

UNIT:

IN # LTV-238 OUT # LTV-238

PICKUP DATE 11/4/2005

TIME 8:00:00 AM

IN 0700 OUT

DELIVER DATE 11/4/2005

TIME 2:00:00 PM

IN OUT

GROSS WT

TARE WT

NET WT

COMMENTS (EXPLAIN DELAY AND DISCREPANCIES):

COMMENTS (EXPLAIN DELAY AND DISCREPANCIES):

NJREG# - 14092

NJ-DEAL-08164681 NJDEP 03217 MOD-071629974

DESCRIPTION:

RQ HAZARDOUS WASTE LIQUID  
NOS 9 - NA-3082, PG III (SILVER)

GAL LOAD 5100

ORDER REF #'S:

OW# :

:

:

:

:

:

DIACARD CLASS 9-NA-3082

SPECIAL INSTRUCTIONS:

VAC FROM FRAC TANK

BILL TO:

CAPITOL ENVIRON

115 C TROLLEY SQ

WILMINGTON, DE 19806

VACUUM YES X VACUUM NO

VACUUM START 0700

VACUUM FINISH 0730

CONTACT : VICKI 302-652-8999 X 101

I, THE UNDERSIGNED, CERTIFY THE LISTED INFORMATION AND DEMURRAGE TIME AND IS TRUE AND COMPLETE.

SHIPPER David Bofinger <sup>for</sup> DATE 11/4/05

CONSIGNEE DATE

PERSONNEL ARE AVAILABLE 24 HOURS/DAY WITH KNOWLEDGE OF THE HAZARDS OF THE CARRIER : SJ TRANSPORTATION CO., INC. (800) 524-2552

MATERIAL AND EMERGENCY RESPONSE INFORMATION OR WHO HAS ACCESS TO A PERSON WITH THAT KNOWLEDGE.

PER :

DATE :

M. J. McDowell  
11-4-05

WHITE COPY - S-J, YELLOW COPY - DRIVER, PINK COPY - TSD, GOLD COPY - CUSTOMER

10502  
2

State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Manifest Section  
P.O. Box 414, Trenton, NJ 08625-0414

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved.

OMB No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. NY ED 7 2 71 05 02 0 3 79 5		Manifest Document No. 0 3 79 5		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address US EPA Reg 11-Westwood Chemical Corp. Site 2890 Woodbridge Ave., Bldg. 209, Edison, NJ 08837						A. State Manifest Number <b>NJA 5303795</b>							
4. Generator's Phone ( 908 420-4514 Attn: Dilshad Perera						B. State Generator's ID (Gen. Site Address) Site: Sect 15							
5. Transporter 1 Company Name SJ TRANSPORTATION Co Inc						C. State Trans. ID-NJDEP X 03217							
6. US EPA ID Number NJ 10 7 1 16 2 9 9 7 6						Decal No. 0 8 1 6 8 1							
7. Transporter 2 Company Name						D. Transporter's Phone ( 856 769-2741							
8. US EPA ID Number						E. State Trans. ID-NJDEP							
9. Designated Facility Name and Site Address E.I. DuPont de Nemours and Company Chambers Works - Route 130 Deepwater, NJ 08023						Decal No.							
10. US EPA ID Number NJ 10 00 2 3 35 7B 0						F. Transporter's Phone ( )							
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM a. X RQ, Hazardous Waste, Liquid, N.O.S. 9, NA3082, 111 (Silver)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
						d 1 d 1 TR		X 5 1 10 0		G		2 10 1 1 1	
J. Additional Descriptions for Materials Listed Above A: App#OW10602 REL 2 ERO 171 a. 1792						K. Handling Codes for Wastes Listed Above a. T 10 1 1							
b.						b.							
c.						c.							
d.						d.							
15. Special Handling Instructions and Additional Information Job# ROAN-SSCH- Tractor: Emergency Contact: Capitol Environmental Services (302) 652-8999 Site: 46 Tower Dr., Middletown, NY 10941													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name DILSHAD J. PERERA						Signature <i>[Signature]</i>				Month Day Year 11/10/05			
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name MERLE L. MILDWELL						Signature <i>[Signature]</i>				Month Day Year 11/10/05			
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name						Signature				Month Day Year			
19. Discrepancy Indication Space I HAVE SIGNED AND SWEAR TO THE ACCURACY OF THE INFORMATION CONTAINED HEREIN													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name ROBERT MILLI						Signature <i>[Signature]</i>				Month Day Year 11/10/05			





State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Manifest Section  
P.O. Box 474, Trenton, NJ 08645-0474



5303796

N YD 01 72 7 10 5 02 03 7 96

NJA 5303796

US EPA Reg 11-Westwood Chemical Corp. Site  
2890 Woodbridge Ave., Bldg. 209, Edison, NJ 08837

Site: sect 15

Generator Ref: 908 420-4514

Transporter Company Name  
ST Transportation

US EPA ID Number  
NJ 071629976

State Trans ID-NUJEP 03217  
Local No 081706

Transporter's Company Name

US EPA ID Number

Transporter's Phone 856 769 2741

Designated Facility Name and Site Address  
E.I. DuPont de Nemours and Company  
Chambers Works - Route 130  
Deepwater, NJ 08023

US EPA ID Number

State Trans ID-NUJEP

Local No.

Transporter's Phone

State Facility's ID

NJ 021385730

Facility's Phone: 856 420-2773

US DOT Labeling: Including Proper Shipping Name, Hazard Class or Division,  
Hazardous Waste Class and Packing Group

Container No. Type Total Quantity Waste No.

X RQ, Hazardous Waste, Liquid, N.O.S.  
9, NA3082, 111 (Silver)

0.01 TT 4829 G D 0 1 1

Additional Descriptions for Materials Listed Above

Handling Codes for Wastes Listed Above

A: App#OW10602 REL ERG 171

Special Handling, Labeling, and Additional Information

Job# ROAN-SSCH

Tractor: 1114

Emergency Contact: Capitol Environmental Services (302) 652-8999

Site: 46 Tower Dr, Middletown, NY 10941

Decal # 081649 Trailer: TV231

I, the undersigned, hereby declare that the contents of this consignment are fully and accurately described above by proper labeling and are in proper condition for transport by highway according to applicable federal, state and local laws and regulations.

I am a large quantity generator, facility that I have a program in place to reduce the volume and toxicity of waste generated to the degree that I am a small quantity generator, I have made a good faith effort to provide the waste generator with the information and materials needed to ensure that the waste is properly managed and that it is available to the waste management system.

DILSHAD J. PERERA

Signature

110405

Signature of Receiver or Recipient of Materials

Vernon Dixon

Signature

110405

Signature of Receiver or Recipient of Materials

Signature



State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Manifest Section  
P.O. Box 414, Trenton, NJ 08625-0414

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved.

OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address US EPA Reg II-Woodward Chemical Corp. Site 3800 Woodbridge Ave., Bldg. 308, Edison, NJ 08837				A. State Manifest Document Number <b>NJA 5303796</b>		
4. Generator's Phone ( ) 732-491-1111				B. State Generator's ID-(Gen. Site Address)		
5. Transporter 1 Company Name				C. State Trans. ID-NJDEP		
6. US EPA ID Number				Decal No.-		
7. Transporter 2 Company Name				D. Transporter's Phone ( )		
8. US EPA ID Number				E. State Trans. ID-NJDEP		
9. Designated Facility Name and Site Address E.I. DuPont de Nemours and Company Chambers Works - Route 130 Paramus, NJ 07652				F. Decal No.-		
10. US EPA ID Number				G. Transporter's Phone ( )		
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM				H. State Facility's ID		
12. Containers				I. Facility's Phone ( )		
No. Type				13. Total Quantity		
a. 2 1. Hazardous Waste, Liquid, N.O.S., 9, 30302, III (Silver)				14. Unit Wt/Vol		
b. 0/00				Waste No.		
c. 1/1						
d. 1/1						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. 30302, III (Silver)				a. 1		
b. 30302, III (Silver)				c. 1		
c. 30302, III (Silver)				b. 1		
d. 30302, III (Silver)				d. 1		
15. Special Handling Instructions and Additional Information Job: 0000-1000 Emergency Contact: Capital Environmental Services (302) 632-0730 Site: 10 Power Dr., Middletown, NJ 08842						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name DILSHAD J. PERERA				Signature Month Day Year 11/10/11		
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature Month Day Year 11/10/11		
Printed/Typed Name Vernon J. Brown				Signature Month Day Year 11/10/11		
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature Month Day Year 11/10/11		
Printed/Typed Name				Signature Month Day Year 11/10/11		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name				Signature Month Day Year 11/10/11		

## GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could make you subject to civil or criminal liabilities as specified in the New Jersey Hazardous Waste Regulations.

### INSTRUCTIONS-IMPORTANT:

#### READ ALL INSTRUCTIONS BEFORE COMPLETING

State & Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and if necessary the continuation sheet for both inter- and intrastate shipments. Continuation sheets may be purchased commercially and photocopied to provide copies as described below.

The New Jersey manifest contains 8 copies. **ALL COPIES MUST BE LEGIBLE.** This form is designed for use on a 12 pitch (elite) typewriter; a firm ball point pen may also be used only if you press down HARD. The 8 copies must be filed with the appropriate party as they are completed. **COPY DISTRIBUTION** is as follows:

- ORIGINAL:** DESTINATION STATE-TSDF must mail original to the state regulatory agency where the facility is located.
- COPY 2:** GENERATOR STATE-The TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3:** GENERATOR COPY-The TSDF mails this copy back to the generator of the waste.
- COPY 4:** TSDF COPY-TSDF keeps this copy for his records.
- COPY 5:** TRANSPORTER COPY-The transporter keeps this copy for his records.  
NOTE: If a continuing transporter is used the generator is responsible for supplying him with a legible photocopy, which must contain required signatures.
- COPY 6:** DESTINATION STATE-The generator mails this copy to the state regulatory agency where the designated facility (TSDF) is located.
- COPY 7:** GENERATOR STATE-The generator mails this copy to the state regulatory agency where the waste was generated.
- COPY 8:** GENERATOR COPY-the generator keeps this copy for his records.  
**ALL 8 COPIES MUST BE LEGIBLE**

### MANIFEST FORM ACQUISITION

- If the destination (consignment) state supplies a manifest & requires its use, then the generator is obligated to obtain the manifest from that state.
- If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest form from the generator state.
- If neither the generator state or the consignment state supplies the manifest, then the generator may obtain the manifest from any source.

### GENERATOR SECTION

- Item 1:** GENERATOR'S EPA ID NO.-MANIFEST DOCUMENT NO.-Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest, for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2:** PAGE 1 OF - Enter the total number of pages used to complete this manifest; i.e. the first page plus the number of continuation sheets, if any.
- Item 3:** GENERATOR'S NAME & MAILING ADDRESS-Enter the name (as notified to EPA) & mailing address of the generator. The address should be the location that will manage the returned manifest forms.
- Item 4:** GENERATOR'S PHONE NUMBER-Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5:** TRANSPORTER 1 COMPANY NAME-Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6:** US EPA ID NUMBER-Enter the EPA identification number of the first transporter identified in item 5.
- Item 7:** TRANSPORTER 2 COMPANY NAME-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste. If more than two (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8:** US EPA ID NUMBER-If a second transporter is used, enter the EPA identification number of the second transporter identified in item 7.
- Item 9:** DESIGNATED FACILITY NAME & SITE ADDRESS-Enter the company name and site address (as notified to the EPA) of the treatment, storage, or disposal facility (TSDF) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10:** EPA ID NUMBER-Enter the EPA identification number of the designated TSDF (or waste reuse facility) listed in item 9.
- Item 11:** USDOT DESCRIPTION-Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a n.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than 4 wastes are being shipped, a second manifest or continuation sheets should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12:** CONTAINERS (NO. & TYPE)-Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of container used:

**TABLE 1  
CONTAINER TYPES**

DM-Metal drums, barrels, kegs  
DW-Wooden drums, barrels, kegs  
DF-Fiberboard or plastic drums, barrels, kegs  
TP-Tanks portable  
TT-Cargo tanks (Tank trucks)  
TC-Tank cars  
DT-Dump truck  
CY-Cylinders  
CM-Metal boxes, cartons, cases (including roll-offs)  
CW-Wooden boxes, cartons, cases  
CF-Fiber or plastic boxes, cartons, cases  
BA-Burlap, cloth, paper/plastic bags

- Item 13:** TOTAL QUANTITY-Enter the total quantity of waste described on each line.  
**DO NOT USE FRACTIONS**
- Item 14:** UNIT (Wt/Vol)-Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line.

**TABLE I  
UNITS OF MEASURE**

G-Gallon (liquids only)  
F-Pounds  
T-Tons (2000 lbs)  
Y-Cubic yards  
L-Liters (liquids only)  
K-Kilograms  
M-Metric Tons (1000 kg)  
N-Cubic meters

- Item 15:** SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION-Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information, if any. If an alternate facility is designated, note it here. For INTERNATIONAL SHIPMENTS, generators must enter the point of departure (city & state) in this space. This space may also be used for emergency response telephone numbers, and any other information the generator is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and USDOT hazardous materials.
- Item 16:** GENERATOR'S CERTIFICATION - The Generator must read, sign (by hand) and date the certification. This must be done the day the transporter picks up the waste shipment (date of receipt by transporter). If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, air) inserted in the space. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g. "and rail") in this space.
- Item A:** STATE MANIFEST DOCUMENT NUMBER - Number preprinted by New Jersey except on the continuation sheets. Enter this number on each continuation sheet attached to a manifest.
- Item B:** STATE GEN ID - The State Generator ID is the street address of the waste generation site. If the mailing address and the site address are the same, enter "same".
- Item C:** STATE TPA# - Enter the New Jersey state permit number. This must include both the transporter's permit number and the decal number of the hazardous waste transport unit or hazardous waste vehicle which contains the waste. For rail shipment(s) enter the alpha numeric I.D. number assigned to the railcar in lieu of the decal number.
- Item D:** TRANSPORTER PHONE-Enter a telephone number with area code where an authorized agent of the transporter can be reached.
- Item E:** STATE TPA# ID-If applicable, enter the New Jersey State permit number of the waste carrying portion of the second vehicle.
- Item F:** TRANSPORTER PHONE-If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.
- Item G:** STATE FACILITY'S ID-No entry is required by New Jersey.
- Item H:** FACILITY PHONE-Enter a telephone number with area code of the TSDF designated to receive the waste listed on the manifest.
- Item I:** WASTE NO.-Enter the 4-digit hazardous waste number as it appears in N.J.A.C. 7:26G-5.1 et. seq. (For example "10047" is the waste number designated for pink/red water from TNT operations.) The proper waste number that accurately describes the shipment, shall be determined according to the hierarchy at N.J.A.C. 7:26G-5.2.
- Item J:** ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE-Enter description of analysis for any waste which does not have a complete USDOT shipping description or has an n.o.s. designation. Enter a general description of the waste stream. (i.e. groundwater contaminated with cresote and copper sulfate). Additionally, for any n.o.s. entry in item 11 which does not conform to the requirements at 49 CFR 172.203(K) enter the two components, and their percentages, which most predominantly contribute to the hazards of the mixture or solution. Enter the physical state (S = Solid, L = Liquid, G = Gas, SL = Sludge) EPA hazard codes (I = Ignitable, C = Corrosive, R = Reactive, E = ECAL, H = Acute Hazardous, T = Toxic). Enter additional information as required by the waste code hierarchy at N.J.A.C. 7:26G-5.2.

### TRANSPORTER SECTION

It is a violation by the transporter if the transporter takes waste from a generator who fails to properly complete the manifest, transports waste to an unauthorized facility, and/or fails to obtain the date and handwritten signature of the next hauler owner/operator of the TSDF facility on the manifest.

- Item 17:** TRANSPORTER 1 ACKNOWLEDGEMENT-Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.
- Item 18:** TRANSPORTER 2 ACKNOWLEDGEMENT-If applicable, follow instructions for item 17 for the second transporter.
- NOTE:** ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.

### DESIGNATED FACILITY (TSDF) SECTION

- Item 19:** DISCREPANCY INDICATION SPACE-The authorized representative of the designated facility must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected wastes. Owners and operators of facilities located in authorized States (i.e., those States that received authorization from the U.S. EPA to administer the hazardous waste program) should contact their State agency for information on State Discrepancy Report requirements.
- Item 20:** FACILITY OWNER/OPERATOR CERTIFICATION-Print or type the name of the person receiving the waste on behalf of the owner/operator of the designated TSDF. That person must acknowledge receiving the waste described on the manifest by signing and entering the date of receipt.
- Item K:** HANDLING CODES-TSDF SHOULD COMPLETE-Enter the ultimate handling method utilized at the designated facility for each waste. Only the following process codes may be used: Storage=S01 (container); S02 (Tank); S04 (Surface impoundment); S05 (Other-specify); Treatment=T01 (Tank); T02 (Surface impoundment); T03 (Incinerator); T04 (Other-specify); Disposal=D79 (Injection Well); D80 (Landfill); D81 (Land Application); D82 (Ocean Disposal); D83 (Surface impoundment); D84 (Other-specify).
- \*NOTE** For interstate shipments you may be required to comply with the manifesting requirements of both the consignment and generator states regarding the completion of specific information included in lettered items A-K. Please check with both generator and consignment states for specific requirements. New Jersey requires that all information be filled in except for item "G".

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimates including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.



DuPont Environmental Treatment

## Notification and Certification Form

OW/DW No. OW10502

Release No. \_\_\_\_\_

(Please fill in)

## Chambers Works Wastewater Treatment Facility Land Disposal Restrictions

1. Generator's EPA ID No. NYD 072 710 502

Hazardous Waste Manifest No. \_\_\_\_\_

Generator US EPA Reg II-Westwood Chemical Corp.Generators Address 46 Tower Drive,

Manifest Page No./Line Letter \_\_\_\_\_

Middletown, NY 10941

(for drummed aqueous waste only)

Note: The DuPont Chambers Works Wastewater Treatment Plan (WWTP) is regulated under the Clean Water Act.

2. Is waste analysis information attached? ☐ Yes ☒ Not Available

3. In Table A, check (if applicable) the characteristic U.S. EPA hazardous waste codes that apply to this waste. For each waste code checked, identify whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed based on the options found on page 2.

TABLE A

Check Waste Code	U.S. EPA Hazardous Waste Code	Subcategory	Waste-water*	Non-Waste-water*	How must the waste be managed?
			(Check only one)		(Enter the letter from page 2)
<input type="checkbox"/>	D001	Low TOC (<10% TOC)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D001	High TOC (≥ 10% TOC)	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D001	Oxidizer	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Acid (pH ≤ 2)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Alkaline (pH ≥ 12.5)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Other Corrosives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Sulfides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Cyanides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Water reactive	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Explosives (pretreated)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Other reactives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D004	Arsenic	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D005	Barium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D006	Cadmium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D007	Chromium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D008	Lead	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D009	Mercury	<input type="checkbox"/>	NA	
<input type="checkbox"/>	D009	Low Mercury <260 mg/kg HG	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D010	Selenium	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	D011	Silver	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A

\*Wastewaters contain &lt;1% TOC and &lt;1% TSS&gt;

**Chambers Works Wastewater Treatment Facility Land Disposal Restrictions (cont.)**

4. In Table B, identify all additional characteristic, listed, newly identified, and newly listed U.S. EPA hazardous waste codes that apply to this waste. For each waste code, identify the subcategory, indicate whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed, based on the options below.

**TABLE B**

U.S. EPA Hazardous Waste Code(s) Per 40 CFR 261	Subcategory		Waste- water*	Non- Waste- water*	How must the waste be managed?  Enter the letter from options below*
			(Check only one)		
	Description	None			
D011		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

5. If this waste is a spent solvent (F001-F005), you **MUST** include Attachment II, Treatment Standards for F001-F005 Spent Solvents.

6. If this waste is a multisource Leachate (F039), you may include Attachment III, Treatment Standards for F039 Multisource Leachate Wastes.

7. If this waste is characteristically hazardous, you may include attachment IV, Universal Treatment Standards. You may also include Attachment IV for nonhazardous waste which was characteristically hazardous as generated but rendered nonhazardous by pretreatment.

\*HOW MUST THE WASTE BE MANAGED? (Choose from the following options to complete Tables A and B.)

A. Restricted waste requires treatment [40 CFR 268.7(a)(2)].

B. Restricted waste meets applicable treatment standards.

GENERATOR'S CERTIFICATION (40 CFR 268.7(a)(3)(i))

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR 268 Subpart D. I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

C. Waste is newly listed or newly identified.

D. Restricted waste is exempt from the Land Disposal Restrictions. Check the reason below and write in the date the waste is subject to prohibitions [40 CFR 268.7(a)(4)].

☐ The waste has been granted a Site-Specific Variance.

☐ The waste has been given a Case-by-Case Extension.

☐ The waste is subject to a National Capacity Variance.

E. Restricted waste has been pretreated to remove the hazardous characteristic and requires treatment of underlying hazardous constituents.

CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR 268.7(b)(4)(iv)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

F. Restricted waste has been pretreated on-site to remove the hazardous characteristic and to treat underlying hazardous constituents to levels in 40 CFR 268.48 Universal Treatment Standards.

CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR 268.7(b)(4)(v)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic, and that underlying hazardous constituents, as defined in §268.2(i), have been treated on-site to meet the §268.48 Universal Treatment Standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

**CERTIFICATION**

I certify that, to the best of my knowledge, the information provided in this document is true, accurate, and complete.

*[Signature]*  
Authorized Signature

ON-SCENE COORDINATOR  
Title

11-04-05  
Date



TRACTOR # 1114TRAILER # TV231DRIVER : VERMOND DIXON

SJ TRANSPORTATION CO., INC.

1176 U.S. ROUTE 40

P.O. BOX 169

WOODSTOWN, NJ 08098

(856) 769-2741

WWW.SJTRANSPORTATION.COM

ORDER # 15787

PRINTED 11/3/2005

BOOKED BY KELDE

MANIFEST # NSA5303796

SHIPPER:

CONSIGNEE:

CUSEMID 1 US EPA REG. II W  
46 TOWER DR.  
MIDDLETOWN, NY 10941IDUPDEE J DUPONT  
CHAMBERWORKS, R  
DEEPWATER, NJ 08023DAVE BOFINGER  
(845) 692-9861BRENDA SIMMONS  
(856) 540-2269

NJD002385730

TRAILER TYPE: TVAC

PICKUP DATE 11/4/2005

DELIVER DATE 11/4/2005

GROSS WT

UNIT:

TIME 9:00:00 AM

TIME 2:00:00 PM

TARE WT

IN # TV231 OUT # TV231IN 900 OUT 1000

IN OUT

NET WT

COMMENTS (EXPLAIN DELAY AND DISCREPANCIES):

COMMENTS (EXPLAIN DELAY AND DISCREPANCIES):

DESCRIPTION:

NSA5303796GAL LOAD 4829RQ, Hazardous waste, Liquid, N.O.S,  
Q. NA3082, III (Silver)

ORDER REF #'S:

OW# : 10502 RE-5

SPECIAL INSTRUCTIONS:

VAC FROM FRAC TANK

BILL TO:

VACUUM YES ✓ VACUUM NOVACUUM START 910VACUUM FINISH 930

CONTACT : VICKI 302-652-8999 X 101

CAPITOL ENVIRON

115 C TROLLEY SQ

WILMINGTON, DE 19806

I, THE UNDERSIGNED, CERTIFY THE LISTED INFORMATION AND DEMURRAGE TIME AND IS TRUE AND COMPLETE.

SHIPPER S. R. P. for ET DATE 11-4-05

CONSIGNEE DATE

PERSONNEL ARE AVAILABLE 24 HOURS/DAY WITH KNOWLEDGE OF THE HAZARDS OF THE CARRIER : SJ TRANSPORTATION CO., INC. (800) 524-2552  
MATERIAL AND EMERGENCY RESPONSE INFORMATION OR WHO HAS ACCESS TO A PERSON : PER :  
WITH THAT KNOWLEDGE. DATE :

WHITE COPY - S-J, YELLOW COPY - DRIVER, PINK COPY - TSD, GOLD COPY - CUSTOMER



State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Manifest Section  
P.O. Box 414, Trenton, NJ 08625-0414

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved.

OMB No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. NJ 10 0 72 7 10 5 02 03 7 96		Manifest Document No. 03 7 96		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address US EPA Reg 11-Westwood Chemical Corp. Site 2890 Woodbridge Ave., Bldg. 209, Edison, NJ 08837						A. State NJ					
4. Generator's Phone (908) 420-4514						B. State Generator's ID-(Gen. Site Address) Site: sect 15					
5. Transporter 1 Company Name SST Transportation						C. State Trans. ID-NJDEP 03 2 1 1					
6. Transporter 1 US EPA ID Number NJ 10 0 7 1 6 2 9 9 7 6						Decal No.- 08 1 7 6 6					
7. Transporter 2 Company Name						D. Transporter's Phone (556) 769 2741					
8. Transporter 2 US EPA ID Number						E. State Trans. ID-NJDEP					
9. Designated Facility Name and Site Address E.I. DuPont de Nemours and Company Chambers Works - Route 130 Deepwater, NJ 08023						Decal No.-					
10. US EPA ID Number NJ 10 0 02 3 05 7 3 0						F. Transporter's Phone ( )					
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM a. X RQ, Hazardous Waste, Liquid, N.O.S. 9, NA3082, 111 (Silver)						12. Containers No. Type 0 1 0 1 TR		13. Total Quantity 4 8 2 9 G		14. Unit W/Vol D 6 1 1 1	
J. Additional Descriptions for Materials Listed Above A: App#OW10502 REL 5 ERG 171						K. Handling Codes for Wastes Listed Above a. T 0 1 c. b. d.					
15. Special Handling Instructions and Additional Information Job# ROAN-SSCH Tractor: 11/4 Emergency Contact: Capitol Environmental Services (302) 652-8999 Site: 46 Tower Drl, Middletown, NY 10941 Decal # 08169 Trailer: TV231						16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name DILSHAD J. PERERA						Signature [Signature] Month Day Year 11/10/05					
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name VERMOND DIXON						Signature [Signature] Month Day Year 11/10/05					
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name						Signature [Signature] Month Day Year					
19. Discrepancy Indication Space I have a small amount 830-510-2773. 2 AM T AND TRAILER AS NOTED ABOVE											
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name ROBERT MILLS						Signature [Signature] Month Day Year 11/10/05					



## GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could make you subject to civil or criminal liabilities as specified in the New Jersey Hazardous Waste Regulations.

## INSTRUCTIONS-IMPORTANT

### READ ALL INSTRUCTIONS BEFORE COMPLETING

State & Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and if necessary the continuation sheet for both Inter- and Intrastate shipments. Continuation sheets may be purchased commercially and photocopied to provide copies as described below.

The New Jersey manifest contains 8 copies. ALL COPIES MUST BE LEGIBLE. This form is designed for use on a 12 pitch (pica) typewriter, a firm ball point pen may also be used only if you press down HARD. The 8 copies must be filed with the appropriate party as they are completed. COPY DISTRIBUTION is as follows:

- ORIGINAL:** DESTINATION STATE-TSDF must mail original to the state regulatory agency where the facility is located.
- COPY 2:** GENERATOR STATE-The TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3:** GENERATOR COPY-The TSDF mails this copy back to the generator of the waste.
- COPY 4:** TSDF COPY-TSDF keeps this copy for his records.
- COPY 5:** TRANSPORTER COPY-The transporter keeps this copy for his records.
- NOTE:** If a continuing transporter is used the generator is responsible for supplying him with a legible photocopy which must contain required signatures.
- COPY 6:** DESTINATION STATE-The generator mails this copy to the state regulatory agency where the designated facility (TSDF) is located.
- COPY 7:** GENERATOR STATE-The generator mails this copy to the state regulatory agency where the waste was generated.
- COPY 8:** GENERATOR COPY-The generator keeps this copy for his records.
- ALL COPIES MUST BE LEGIBLE

## MANIFEST FORM ACQUISITION

- If the destination (consignment) state supplies a manifest & requires its use, then the generator is obligated to obtain the manifest from that state.
- If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest form from the generator state.
- If neither the generator state or the consignment state supplies the manifest, then the generator may obtain the manifest from any source.

## GENERATOR SECTION

- Item 1:** GENERATOR'S EPA ID NO.-MANIFEST DOCUMENT NO.-Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest, for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- PAGE 1 OF** Enter the total number of pages used to complete this manifest; i.e. the first page plus the number of continuation sheets, if any.
- Item 2:** GENERATOR'S NAME & MAILING ADDRESS-Enter the name (as notified to EPA) & mailing address of the generator. The address should be the location that will manage the returned manifest forms.
- Item 4:** GENERATOR'S PHONE NUMBER-Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5:** TRANSPORTER 1 COMPANY NAME-Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6:** US EPA ID NUMBER-Enter the EPA identification number of the first transporter identified in Item 5.
- Item 7:** TRANSPORTER 2 COMPANY NAME-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste. If more than two (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8:** US EPA ID NUMBER-If a second transporter is used, enter the EPA identification number of the second transporter identified in Item 7.
- Item 9:** DESIGNATED FACILITY NAME & SITE ADDRESS-Enter the company name and site address (as notified to the EPA) of the treatment, storage, or disposal facility (TSDF) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10:** EPA ID NUMBER-Enter the EPA identification number of the designated TSDF (or waste reuse facility) listed in Item 9.
- Item 11:** USDOT DESCRIPTION-Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a n.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than 4 wastes are being shipped, a second manifest or continuation sheet(s) should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12:** CONTAINERS (NO. & TYPE)-Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of container used:

## TABLE 1 CONTAINER TYPES

- DM-Metal drums, barrels, kegs  
DW-Wooden drums, barrels, kegs  
DF-Fiberboard or plastic drums, barrels, kegs  
TP-Tanks portable  
TT-Cargo tanks (Tank trucks)  
TC-Tank cars  
DT-Dump truck  
CY-Cylinders  
CM-Metal boxes, cartons, cases (including roll-offs)  
CW-Wooden boxes, cartons, cases  
CF-Fiber or plastic boxes, cartons, cases  
BA-Burial, casket, paper-lined box

- Item 13:** TOTAL QUANTITY-Enter the total quantity of waste described on each line. DO NOT USE FRACTIONS
- Item 14:** UNIT (Vol/WT)-Enter the appropriate abbreviation from Table 2 (below) for the unit of measure used in determining the total quantity of waste described on each line.
- TABLE 2  
UNIT ABBREVIATIONS**
- G-Gallons (liquids only)  
P-Pounds  
T-Tons (2000 lbs.)  
Y-Cubic yards  
L-Liters (liquids only)  
K-Kilograms  
M-Metric tons (1000 kg)  
C-Cubic centimeters
- Item 15:** SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION-Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information. If a special alternate facility is designated, note it here. For INTERSTATE SHIPMENTS, generators must enter the point of departure (city & state) in the space. This record may also be used for emergency response telephone numbers, and any other information the generator is required to include under the RCRA manifest rules with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and HMTD hazardous materials.
- Item 16:** GENERATOR'S CERTIFICATE OF TREATMENT (COT)-The generator must read, sign (by hand) and date the certificate. This must be done on the day the transporter picks up the waste shipment (date of receipt by transporter). If a continuing transporter is used, the word "highway" should be lined out and the appropriate words (land, water, air) should be signed. If another mode in addition to the highway mode is used, it should be signed additional (air, land, and rail) in this space.
- Item 17:** STATE CERTIFICATE OF TREATMENT (COT)-Number prepared by New Jersey except on the continuation sheet. Enter the number on each continuation sheet attached to a manifest.
- Item 18:** STATE CERTIFICATE OF TREATMENT (COT)-Enter the number of the waste generation slip. If the manifest is not received by the designated facility, the same address as above.
- Item 19:** STATE CERTIFICATE OF TREATMENT (COT)-Enter the number of the waste generation slip. This must include both the transporter's name and a description of the hazardous waste transport unit or hazardous waste which will be used in the space. For all shipment(s) enter the alpha numeric I.D. number assigned to the transporter by the state.
- Item 20:** TRANSPORTER'S PHONE NUMBER-Enter the number with area code where an authorized agent of the transporter can be reached in an emergency.
- Item 21:** STATE TRANSFER ID NUMBER-Enter the New Jersey State permit number of the waste carrying portion of the truck, train, or ship.
- Item 22:** TRANSPORTER'S PHONE NUMBER-Enter a telephone number with area code where an authorized agent of the transporter can be reached in an emergency.
- Item 23:** STATE TRANSFER ID NUMBER-Enter the New Jersey State permit number of the waste carrying portion of the truck, train, or ship.
- Item 24:** FACILITY TREATMENT DESCRIPTION-Enter the name of the TSDF designated to receive the waste and the treatment description.
- Item 25:** WASTE NO. Enter the waste number assigned to the waste as it appears in N.J.A.C. 7:23G-5.1 et seq. (For example, 001, 002, etc.) and the number assigned for divided waste from TNY operations.) The proper waste number is determined by the waste shipment slip, be determined according to the hierarchy of the waste number.
- Item 26:** ADDITIONAL DESCRIPTIONS FOR WASTE-AS LISTED ABOVE-Enter description of analysis for any waste which is not a listed waste under USDOT shipping description or has a n.o.s. designation. Enter a description of the waste shipment (i.e. generator's containerized with description of contents), additional, for any n.o.s. or by item 11 which does not conform to the requirements of 49 CFR 172.203(d) enter the two components, and their percentages, which make up the mixture or solution. Enter the physical state of the waste (solid, liquid, gas, etc.) EPA hazard codes (1 = Ignitable, 2 = Corrosive, 3 = Reactive, 4 = Toxic, 5 = Flammable, 6 = Hazardous). Enter additional information as required by the waste manifest regulations (49 CFR 172.203-2).

It is a violation by the transporter to sign and date the certificate of treatment who fails to properly complete the manifest, transporter must obtain and sign, and date the certificate of treatment and hand it to the generator or the next hauler owner/transporter of the TSDF, or the manifest.

- Item 17:** TRANSPORTER 1 COMPANY NAME-Print or type the name of the person accepting the waste on behalf of the transporter. The person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.
- Item 18:** TRANSPORTER 2 COMPANY NAME-If applicable, follow instructions for Item 17 for the second transporter.
- NOTE:** ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.

- Item 19:** DISCREPANCY-If the generator or authorized representative of the designated facility must note in this space any discrepancy or anomaly between the waste described on the manifest and the waste actually received at the facility. Any reported anomaly should be filed here, along with an explanation of the location of the reported anomaly. Owners and operators of facilities located in authorized States (i.e. those States that received authorization from the U.S. EPA to authorize the receipt of waste or other) should contact their State agency for information on State Discrepancy Report requirements.
- Item 20:** FACILITY OWNER/OPERATOR CERTIFICATION-Print or type the name of the person receiving the waste at the facility. The owner/operator of the designated TSDF must acknowledge receipt of the waste described on the manifest by signing and entering the date of receipt.
- Item 21:** HANDLING CODES-USE SHOULD BE COMPLETED-Enter the ultimate handling method utilized of the waste, and enter the treatment description. The following process codes may be used: Storage-S01 (containment), S02 (isolation), S03 (containment), S04 (containment), S05 (containment), S06 (containment), S07 (containment), S08 (containment), S09 (containment), S10 (containment), S11 (containment), S12 (containment), S13 (containment), S14 (containment), S15 (containment), S16 (containment), S17 (containment), S18 (containment), S19 (containment), S20 (containment), S21 (containment), S22 (containment), S23 (containment), S24 (containment), S25 (containment), S26 (containment), S27 (containment), S28 (containment), S29 (containment), S30 (containment), S31 (containment), S32 (containment), S33 (containment), S34 (containment), S35 (containment), S36 (containment), S37 (containment), S38 (containment), S39 (containment), S40 (containment), S41 (containment), S42 (containment), S43 (containment), S44 (containment), S45 (containment), S46 (containment), S47 (containment), S48 (containment), S49 (containment), S50 (containment), S51 (containment), S52 (containment), S53 (containment), S54 (containment), S55 (containment), S56 (containment), S57 (containment), S58 (containment), S59 (containment), S60 (containment), S61 (containment), S62 (containment), S63 (containment), S64 (containment), S65 (containment), S66 (containment), S67 (containment), S68 (containment), S69 (containment), S70 (containment), S71 (containment), S72 (containment), S73 (containment), S74 (containment), S75 (containment), S76 (containment), S77 (containment), S78 (containment), S79 (containment), S80 (containment), S81 (containment), S82 (containment), S83 (containment), S84 (containment), S85 (containment), S86 (containment), S87 (containment), S88 (containment), S89 (containment), S90 (containment), S91 (containment), S92 (containment), S93 (containment), S94 (containment), S95 (containment), S96 (containment), S97 (containment), S98 (containment), S99 (containment), S100 (containment).

**NOTE:** For information on the proper use of the manifest and the requirements of both the generator and transporter, call the New Jersey Department of Environmental Protection at (609) 292-2000. For information on the proper use of the manifest and the requirements of both the generator and transporter, call the New Jersey Department of Environmental Protection at (609) 292-2000.

Public reporting burden for this collection of forms is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing the form, including the time for reviewing the instructions, gathering data, and completing the form. Send comments regarding the burden estimates including suggestions for reducing the burden to the Chief, Information Policy Branch, PH-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.



State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Manifest Section  
P.O. Box 414, Trenton, NJ 08625-0414

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved.

OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NY007271050237		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.							
3. Generator's Name and Mailing Address US EPA Reg II-Hazardous Chemical Corp. SCo 2300 Winding Ridge Ave. Bldg. 505, Edison, NJ 08817						A. State Manifest Document Number <b>NJA 5237311</b>									
4. Generator's Phone (908) 420-4614 Attn: David Perera						B. State Generator's ID-(Gen. Site Address) 050196									
5. Transporter 1 Company Name S8 Transport Limited						6. US EPA ID Number NJ0071251176									
7. Transporter 2 Company Name						8. US EPA ID Number									
9. Designated Facility Name and Site Address E.I. DuPont de Nemours and Company Chlor-Alkali Works - Route 130 Freehold, NJ 08023						10. US EPA ID Number NJ0002085720									
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
a. X PQ, Hazardous Waste, Liquid N.O.S., H. NARCB2, III (55-00)						001 TT		050196				1111			
b.															
c.															
d.															
J. Additional Descriptions for Materials Listed Above A. ACID BATTERY FOR ENGINE						K. Handling Codes for Wastes Listed Above									
a.						a.									
b.						b.									
c.						c.									
d.						d.									
15. Special Handling Instructions and Additional Information Emergency Contact: Capital Environmental Services (908) 424-4242 Contact: David Perera, Edison, NJ 08817															
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.															
Printed/Typed Name DILSHAD J. PERERA						Signature <i>[Signature]</i>						Month Day Year 11 11 05			
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name GARY NICK						Signature <i>[Signature]</i>		Month Day Year 11 11 05	
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name						Signature		Month Day Year	
19. Discrepancy Indication Space															
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.															
Printed/Typed Name						Signature						Month Day Year			

## GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could make you subject to civil or criminal liabilities as specified in the New Jersey Hazardous Waste Regulations.

### INSTRUCTIONS-IMPORTANT:

#### READ ALL INSTRUCTIONS BEFORE COMPLETING

State & Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and if necessary the continuation sheet for both inter- and intrastate shipments. Continuation sheets may be purchased commercially and photocopied to provide copies as described below.

The New Jersey manifest contains 8 copies. **ALL COPIES MUST BE LEGIBLE.** This form is designed for use on a 12 pitch (elite) typewriter; a firm ball point pen may also be used only if you press down HARD. The 8 copies must be filed with the appropriate party as they are completed. **COPY DISTRIBUTION** is as follows:

- ORIGINAL:** **DESTINATION STATE-TSDF** must mail original to the state regulatory agency where the facility is located.
- COPY 2:** **GENERATOR STATE**-The TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3:** **GENERATOR COPY**-The TSDF mails this copy back to the generator of the waste.
- COPY 4:** **TSDF COPY**-TSDF keeps this copy for his records.
- COPY 5:** **TRANSPORTER COPY**-The transporter keeps this copy for his records.
- NOTE:** If a *continuing transporter* is used the generator is responsible for supplying him with a legible photocopy, which must contain required signatures.
- COPY 6:** **DESTINATION STATE**-The generator mails this copy to the state regulatory agency where the designated facility (TSDF) is located.
- COPY 7:** **GENERATOR STATE**-The generator mails this copy to the state regulatory agency where the waste was generated.
- COPY 8:** **GENERATOR COPY**-the generator keeps this copy for his records.

#### ALL 8 COPIES MUST BE LEGIBLE

### MANIFEST FORM ACQUISITION

- If the destination (consignment) state supplies a manifest & requires its use, then the generator is obligated to obtain the manifest from that state.
- If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest form from the generator state.
- If neither the generator state or the consignment state supplies the manifest, then the generator may obtain the manifest from any source.

### GENERATOR SECTION

- Item 1:** **GENERATOR'S EPA ID NO.-MANIFEST DOCUMENT NO.**-Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest, for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2:** **PAGE 1 Of** Enter the total number of pages used to complete this manifest; i.e. the first page plus the number of continuation sheets, if any.
- Item 3:** **GENERATOR'S NAME & MAILING ADDRESS**-Enter the name (as notified to EPA) & mailing address of the generator. The address should be the location that will manage the returned manifest forms.
- Item 4:** **GENERATOR'S PHONE NUMBER**-Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5:** **TRANSPORTER 1 COMPANY NAME**-Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6:** **US EPA ID NUMBER**-Enter the EPA identification number of the first transporter identified in item 5.
- Item 7:** **TRANSPORTER 2 COMPANY NAME**-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste. If more than two (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8:** **US EPA ID NUMBER**-If a second transporter is used, enter the EPA identification number of the second transporter identified in item 7.
- Item 9:** **DESIGNATED FACILITY NAME & SITE ADDRESS**-Enter the company name and site address (as notified to the EPA) of the treatment, storage, or disposal facility (TSDF) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10:** **EPA ID NUMBER**-Enter the EPA identification number of the designated TSDF (or waste reuse facility) listed in item 9.
- Item 11:** **USDOT DESCRIPTION**-Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a n.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than 4 wastes are being shipped, a second manifest or continuation sheets should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12:** **CONTAINERS (NO. & TYPE)**-Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of container used:

**TABLE 1  
CONTAINER TYPES**

DM-Metal drums, barrels, kegs  
DW-Wooden drums, barrels, kegs  
DF-Fiberboard or plastic drums, barrels, kegs  
TP-Tanks portable  
TT-Cargo tanks (Tank trucks)  
TC-Tank cars  
DT-Dump truck  
CY-Cylinders  
CM-Metal boxes, cartons, cases (including roll-offs)  
CW-Wooden boxes, cartons, cases  
CF-Fiber or plastic boxes, cartons, cases  
BA-Burlap, cloth, paper/plastic bags

- Item 13:** **TOTAL QUANTITY**-Enter the total quantity of waste described on each line. **DO NOT USE FRACTIONS**
- Item 14:** **UNIT (Wt./Vol.)**-Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line.

**TABLE II  
UNITS OF MEASURE**

G-Gallons (liquids only)  
P-Pounds  
T-Tons (2000 lbs.)  
Y-Cubic yards  
L-Liters (liquids only)  
K-Kilograms  
M-Metric Tons (1000 kg)  
N-Cubic Meters

- Item 15:** **SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION**-Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information, if any. If an alternate facility is designated, note it here. For **INTERNATIONAL SHIPMENTS**, generators must enter the point of departure (city & state) in this space. This space may also be used for emergency response telephone numbers, and any other information the generator is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and USDOT hazardous materials.
- Item 16:** **GENERATOR'S CERTIFICATION** - The Generator must read, sign (by hand) and date the certification. This must be done the day the transporter picks up the waste shipment (date of receipt by transporter). If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, air) inserted in the space. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g. "and rail") in this space.
- Item A:** **STATE MANIFEST DOCUMENT NUMBER** - Number preprinted by New Jersey except on the continuation sheets. Enter this number on each continuation sheet attached to a manifest.
- Item B:** **STATE GEN ID** - The State Generator ID is the street address of the waste generation site. If the mailing address and the site address are the same, enter "same".
- Item C:** **STATE TRAN #1 ID**-Enter the New Jersey state permit number. This must include both the transporter's permit number and the decal number of the hazardous waste transport unit or hazardous waste vehicle which contains the waste. For rail shipment(s) enter the alpha numeric I.D. number assigned to the railcar in lieu of the decal number.
- Item D:** **TRANSPORTER PHONE**-Enter a telephone number with area code where an authorized agent of the transporter can be reached.
- Item E:** **STATE TRAN #2 ID**-If applicable, enter the New Jersey State permit number of the waste carrying portion of the second vehicle.
- Item F:** **TRANSPORTER PHONE**-If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.
- Item G:** **STATE FACILITY'S ID**-No entry is required by New Jersey.
- Item H:** **FACILITY PHONE**-Enter a telephone number with area code of the TSDF designated to receive the waste listed on the manifest.
- Item I:** **WASTE NO.**-Enter the 4-digit hazardous waste number as it appears in N.J.A.C. 7:26G-5.1 et seq. (For example "K047" is the waste number designated for pink/red water from TNT operations.) The proper waste number that accurately describes the shipment, shall be determined according to the hierarchy at N.J.A.C. 7:26G-6.2.
- Item J:** **ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE**-Enter description of analysis for any waste which does not have a complete USDOT shipping description or has an n.o.s. designation. Enter a general description of the waste stream. (i.e. groundwater contaminated with creosotes and copper sulfate). Additionally, for any n.o.s. entry in item 11 which does not conform to the requirements at 49 CFR 172.203(K) enter the two components, and their percentages, which most predominantly contribute to the hazards of the mixture or solution. Enter the physical state (S = Solid, L = Liquid, G = Gas, SL = Sludge) EPA hazard codes (I = Ignitable, C = Corrosive, R = Reactive, E = TCLP, H = Acute Hazardous, T = Toxic). Enter additional information as required by the waste code hierarchy at N.J.A.C. 7:26G-6.2.

### TRANSPORTER SECTION

It is a violation by the transporter if he accepts hazardous waste from a generator who fails to properly complete the manifest, transports waste to an unauthorized facility, and/or fails to obtain the date and handwritten signature of the next hauler owner/operator of the TSDF facility on the manifest.

- Item 17:** **TRANSPORTER 1 ACKNOWLEDGEMENT**-Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.
- Item 18:** **TRANSPORTER 2 ACKNOWLEDGEMENT**-If applicable, follow instructions for item 17 for the second transporter.
- NOTE:** **ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.**

### DESIGNATED FACILITY (TSDF) SECTION

- Item 19:** **DISCREPANCY INDICATION SPACE**-The authorized representative of the designated facility must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected wastes. Owners and operators of facilities located in authorized States (i.e., those States that received authorization from the U.S. EPA to administer the hazardous waste program) should contact their State agency for information on State Discrepancy Report requirements.
- Item 20:** **FACILITY OWNER/OPERATOR CERTIFICATION**-Print or type the name of the person receiving the waste on behalf of the owner/operator of the designated TSDF. That person must acknowledge receiving the waste described on the manifest by signing and entering the date of receipt.
- Item K:** **HANDLING CODES-TSDF SHOULD COMPLETE**-Enter the ultimate handling method utilized at the designated facility for each waste. Only the following process codes may be used: Storage=S01 (container); S02 (Tank); S04 (Surface Impoundment); S05 (Other-specify); Treatment=T01 (Tank); T02 (Surface Impoundment); T03 (Incinerator); T04 (Other-specify); Disposal=D09 (Injection Well); D80 (Landfill); D81 (Land Application); D82 (Ocean Disposal); D83 (Surface Impoundment); D84 (Other-specify).
- \*NOTE** For interstate shipments you may be required to comply with the manifesting requirements of both the consignment and generator states regarding the completion of specific information included in lettered items A-K. Please check with both generator and consignment states for specific requirements. New Jersey requires that all information be filled in except for item "G".

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimates including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.



DuPont Environmental Treatment

# Notification and Certification Form

OW/DW No. OW10502

Release No. \_\_\_\_\_

(Please fill in)

## Chambers Works Wastewater Treatment Facility Land Disposal Restrictions

1. Generator's EPA ID No. NYD 072 710 502  
Generator US EPA Reg II-Westwood Chemical Corp.  
Generators Address 46 Tower Drive,  
Middletown, NY 10941

Hazardous Waste Manifest No. NJA5237311

Manifest Page No./Line Letter \_\_\_\_\_

(for drummed aqueous waste only)

Note: The DuPont Chambers Works Wastewater Treatment Plan (WWTP) is regulated under the Clean Water Act.

2. Is waste analysis information attached? ☐ Yes ☒ Not Available

3. In Table A, check (if applicable) the characteristic U.S. EPA hazardous waste codes that apply to this waste. For each waste code checked, identify whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed based on the options found on page 2.

TABLE A

Check Waste Code	U.S. EPA Hazardous Waste Code	Subcategory	Waste-water*	Non-Waste-water*	How must the waste be managed?
			(Check only one)		(Enter the letter from page 2)
<input type="checkbox"/>	D001	Low TOC (<10% TOC)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D001	High TOC ( 10% TOC)	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D001	Oxidizer	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Acid (pH ...2)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Alkaline (pH 12.5)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Other Corrosives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Sulfides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Cyanides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Water reactive	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Explosives (pretreated)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Other reactives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D004	Arsenic	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D005	Barium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D006	Cadmium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D007	Chromium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D008	Lead	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D009	Mercury	<input type="checkbox"/>	NA	
<input type="checkbox"/>	D009	Low Mercury <260 mg/kg HG	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D010	Selenium	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	D011	Silver	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A

\*Wastewaters contain <1% TOC and <1% TSS>

## Chambers Works Wastewater Treatment Facility Land Disposal Restrictions (cont.)

4. In Table B, identify all additional characteristic, listed, newly identified, and newly listed U.S. EPA hazardous waste codes that apply to this waste. For each waste code, identify the subcategory, indicate whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed, based on the options below.

TABLE B

U.S. EPA Hazardous Waste Code(s) Per 40 CFR 261	Subcategory		Waste- water*	Non- Waste- water*	How must the waste be managed? Enter the letter from options below*
			(Check only one)		
	Description	None			
D011		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

5. If this waste is a spent solvent (F001-F005), you **MUST** include Attachment II, Treatment Standards for F001-F005 Spent Solvents.
6. If this waste is a multisource Leachate (F039), you may include Attachment III, Treatment Standards for F039 Multisource Leachate Wastes.
7. If this waste is characteristically hazardous, you may include attachment IV, Universal Treatment Standards. You may also include Attachment IV for nonhazardous waste which was characteristically hazardous as generated but rendered nonhazardous by pretreatment.

**\*HOW MUST THE WASTE BE MANAGED?** (Choose from the following options to complete Tables A and B.)

A. Restricted waste requires treatment [40 CFR 268.7(a)(2)].

B. Restricted waste meets applicable treatment standards.

**GENERATOR'S CERTIFICATION** [40 CFR 268.7(a)(3)(i)]

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in

40 CFR 268 Subpart D. I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

C. Waste is newly listed or newly identified.

D. Restricted waste is exempt from the Land Disposal Restrictions. Check the reason below and write in the date the waste is subject to prohibitions [40 CFR 268.7(a)(4)].

☐ The waste has been granted a Site-Specific Variance.

☐ The waste has been given a Case-by-Case Extension.

☐ The waste is subject to a National Capacity Variance.

E. Restricted waste has been pretreated to remove the hazardous characteristic and requires treatment of underlying hazardous constituents.

**CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS** [40 CFR 268.7(b)(4)(iv)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

F. Restricted waste has been pretreated on-site to remove the hazardous characteristic and to treat underlying hazardous constituents to levels in 40 CFR 268.48 Universal Treatment Standards.

**CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS** [40 CFR 268.7(b)(4)(v)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic, and that underlying hazardous constituents, as defined in §268.2(i), have been treated on-site to meet the §268.48 Universal Treatment Standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

### CERTIFICATION

I certify that, to the best of my knowledge, the information provided in this document is true, accurate, and complete.

Authorized Signature

Title

Date





State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Manifest Section  
P.O. Box 414, Trenton, NJ 08625-0414.

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved.

OMB No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>NYD07271050237811</b>		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>US EPA Reg II Westwood Chemical Corp. Site 2800 Woodbridge Ave., Bldg. 209, Edison, NJ 08837</b>				A. State Manifest Document Number <b>NJA 5237311</b>			
4. Generator's Phone ( <b>908</b> ) <b>420-4514</b> Attn: <b>Dilshad Perera</b>				B. State Generator's ID-(Gen. Site Address) <b>Site Sect 15</b>			
5. Transporter 1 Company Name <b>S&amp;J TRANSPORTATION</b>		6. US EPA ID Number <b>NJ010716299716</b>		C. State Trans. ID-NJDEP <b>032117</b>		Decal No.- <b>081792</b>	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone ( )		E. State Trans. ID-NJDEP	
9. Designated Facility Name and Site Address <b>E.I. DuPont de Nemours and Company Chambers Works - Route 130 Deepwater, NJ 08023</b>		10. US EPA ID Number <b>NJ01002385730</b>		F. Transporter's Phone ( )		G. State Facility's ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) <b>HM</b>		12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol	
a. <b>X</b> <b>RQ, Hazardous Waste, Liquid, N.O.S., 9, NA3082, III (Solvent)</b>		b. <b>001 TT</b>		c. <b>050196</b>		d. <b>D011</b>	
J. Additional Descriptions for Materials Listed Above a. <b>A: App# OW10602 Ref</b> <b>ERG171</b>		K. Handling Codes for Wastes Listed Above a. <b>T101</b>		c.		d.	
b.		d.		b.		d.	
15. Special Handling Instructions and Additional Information <b>Job# ROAN-SSCH- Tractor: 1117</b> <b>Emergency Contact: Capital Environmental Services (302) 682-6899</b> <b>Site: 46 Tower Dr. Middletown, NY 10841 Trailer: TV250-TAG-T42-08H NJ</b>							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name <b>DILSHAD J. PERERA</b>				Signature <i>[Signature]</i>		Month Day Year <b>11/1/05</b>	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name <b>GARY NOLT</b>				Signature <i>[Signature]</i>		Month Day Year <b>11/1/05</b>	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature		Month Day Year	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name <b>ROBERT W. TOND</b>							
Signature <i>[Signature]</i>				Month Day Year <b>11/1/05</b>			

## GENERAL INFORMATION

The Hazardous Waste Manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect, or illegible manifests are violations of the law, and could make you subject to civil or criminal liabilities as specified in the New Jersey Hazardous Waste Regulations.

## INSTRUCTIONS-IMPORTANT

### READ ALL INSTRUCTIONS BEFORE COMPLETING

State & Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and, if necessary, the continuation sheet for both inter- and intrastate shipments. Continuation sheets may be purchased commercially and photocopied to provide copies as described below.

The New Jersey manifest contains 3 copies. ALL COPIES MUST BE LEGIBLE. This form is designed for use on a 12 pitch (dots) typewriter; a firm ball point pen may also be used only if you press down HARD. The 3 copies must be filed with the appropriate party as they are completed. COPY DISTRIBUTION is as follows:

- ORIGINAL: DESTINATION STATE-TSDF must mail original to the state regulatory agency where the facility is located.
- COPY 2: GENERATOR STATE-The TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3: GENERATOR COPY-The TSDF mails this copy back to the generator of the waste.
- COPY 4: TSD COPY-TSDF keeps this copy for his records.
- COPY 5: TRANSPORTER COPY-The transporter keeps this copy for his records.
- NOTE: If a continuing transporter is used the generator is responsible for supplying him with a legible photocopy, which must contain required signatures.
- COPY 6: DESTINATION STATE-The generator mails this copy to the state regulatory agency where the designated facility (TSD) is located.
- COPY 7: GENERATOR STATE-The generator mails this copy to the state regulatory agency where the waste was generated.
- COPY 8: GENERATOR COPY-The generator keeps this copy for his records.

## MANIFEST FORM ACQUISITION

- If the destination (consignee) state supplies a manifest & requires its use, then the generator is obligated to obtain a manifest from that state.
- If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest from the generator state.
- If neither the generator state or the consignee state supplies the manifest, then the generator may obtain the manifest from any source.

## GENERATOR SECTION

- Item 1: GENERATOR'S EPA ID NO.-MANIFEST DOCUMENT NO.-Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest, for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2: PAGE 1 OF - Enter the total number of pages used to complete this manifest; i.e. the first page plus the number of continuation sheets, if any.
- Item 3: GENERATOR'S NAME & MAILING ADDRESS-Enter the name (as notified to EPA) & mailing address of the generator. This address should be the location that will manage the returned manifest forms.
- Item 4: GENERATOR'S PHONE NUMBER-Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5: TRANSPORTER 1 COMPANY NAME-Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6: US EPA ID NUMBER-Enter the EPA identification number of the first transporter identified in item 5.
- Item 7: TRANSPORTER 2 COMPANY NAME-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste. If more than two (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8: US EPA ID NUMBER-If a second transporter is used, enter the EPA identification number of the second transporter identified in item 7.
- Item 9: DESIGNATED FACILITY NAME & SITE ADDRESS-Enter the company name and site address (as notified to the EPA) of the treatment, storage, or disposal facility (TSD) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10: EPA ID NUMBER-Enter the EPA identification number of the designated TSD (for waste must facility) listed in item 9.
- Item 11: USDOT DESCRIPTION-Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a h.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than a waste is being shipped, a second manifest or continuation sheet should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12: CONTAINERS (NO. & TYPE)-Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of container used.

## CONTAINER TYPES

- DR-Metal drums, barrels, kegs
- DW-Wooden drums, barrels, kegs
- DF-Fiberboard or plastic drums, barrels, kegs
- TP-Tank portable
- TT-Cargo tanks (Tank trucks)
- TC-Tank cars
- DT-Dump truck
- CY-Cylinders
- CB-Metal boxes, cartons, cases (including roll-offs)
- CW-Wooden boxes, cartons, cases
- CF-Fiber or plastic boxes, cartons, cases
- BA-Bagging, cloth, paper/plastic bags

- Item 13: TOTAL QUANTITY-Enter the total quantity of waste described on each line. DO NOT USE FRACTIONS
- Item 14: UNIT (Wt./Vol.)-Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line.

## UNITS OF MEASURE

- G-Gallons (liquids only)
- P-Pounds
- T-Tons (2000 lbs.)
- Y-Cubic yards
- L-Liters (liquids only)
- K-Kilograms
- M-Metric Tons (1000 kg)
- N-Cubic meters

- Item 15: SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION-Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information. If any, if an alternate facility is designated, note it here. For INTERNATIONAL SHIPMENTS, generators must enter the point of departure (city & state) in this space. This space may also be used for emergency response telephone numbers, and any other information the generator is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and USDOT hazardous materials.
- Item 16: GENERATOR'S CERTIFICATION - The Generator must read, sign (by hand) and date the certification. This must be done the day the transporter picks up the waste shipment (date of receipt by transporter). If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, air) inserted in the space. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g. "and rail") in this space.
- Item A: STATE MANIFEST DOCUMENT NUMBER - Number promulgated by New Jersey except on the continuation sheets. Enter this number on each continuation sheet attached to a manifest.
- Item B: STATE GEN ID -The State Generator ID is the street address of the waste generation site. If the mailing address and the site address are the same, enter "same".
- Item C: STATE TRAN # ID-Enter the New Jersey state permit number. This must include both the transporter's permit number and the decimal number of the hazardous waste transport unit or hazardous waste vehicle which contains the waste. For all shipments, enter the alpha numeric I.D. number assigned to the trailer in lieu of the decimal number.
- Item D: TRANSPORTER PHONE-Enter a telephone number with area code where an authorized agent of the transporter can be reached.
- Item E: STATE TRAN #2 ID-If applicable, enter the New Jersey State permit number of the waste carrying portion of the second vehicle.
- Item F: TRANSPORTER PHONE 2-If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.
- Item G: STATE FACILITY'S ID-Not entry is required by New Jersey
- Item H: FACILITY PHONE-Enter a telephone number with area code of the TSD designated to receive the waste listed on the manifest.
- Item I: WASTE NO.-Enter the 4 digit hazardous waste number as it appears in N.J.A.C. 7:26G-5.1 et. seq. (For example "K047" is the waste number designated for pink/red water from TNT operations.) The proper waste number that accurately describes the shipment, shall be determined according to the hierarchy in N.J.A.C. 7:26G-3.2.
- Item J: ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE-Enter description of analysis for any waste which does not have a complete USDOT shipping description or has an n.o.s. designation. Enter a general description of the waste stream, (i.e. groundwater contaminated with creosote and copper sulfate). Additionally, for any n.o.s. entry in item 11 which does not conform to the requirements of 49 CFR 172.203(K) enter the two components, and their percentages, which most predominantly contribute to the hazards of the mixture or solution. Enter the physical state (S = Solid, L = Liquid, G = Gas, SL = Sludge) EPA hazard codes (I = Ignitable, C = Corrosive, R = Reactive, E = Toxic, H = Hazardous, T = Toxic). Enter additional information as required by the waste code hierarchy in N.J.A.C. 7:26G-3.2.

## TRANSPORTER SECTION

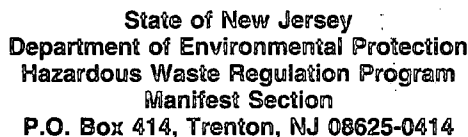
- It is a violation by the transporter if he accepts hazardous waste from a generator who fails to properly complete the manifest, transports waste in an unauthorized facility, and/or fails to obtain the date and handwritten signature of the next hauler owner/operator of the TSD facility on the manifest.
- Item 17: TRANSPORTER 1 ACKNOWLEDGEMENT-Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.
  - Item 18: TRANSPORTER 2 ACKNOWLEDGEMENT-If applicable, follow instructions for item 17 for the second transporter.
  - NOTE: ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.

## DESIGNATED FACILITY (TSD) SECTION

- Item 19: DISCREPANCY INDICATION SPACE-The authorized representative of the designated facility must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected wastes. Owners and operators of facilities located in authorized States (i.e., those States that received authorization from the U.S. EPA to administer the hazardous waste program) should contact their State agency for information on State Discrepancy Report requirements.
- Item 20: FACILITY OWNER/OPERATOR CERTIFICATION-Print or type the name of the person receiving the waste on behalf of the owner/operator of the designated TSD. That person must acknowledge receiving the waste described on the manifest by signing and entering the date of receipt.
- Item K: HANDLING CODES-TSDF SHOULD COMPLETE-Enter the ultimate handling method utilized at the designated facility for each waste. Only the following process codes may be used: Storage-S01 (container); S02 (Tank); S04 (Surface Impoundment); S05 (Other-specify); Treatment-T01 (Tank); T02 (Surface Impoundment); T03 (Incineration); T04 (Other-specify); Disposal-D01 (Injection Well); D02 (Landfill); D03 (Land Application); D02 (Ocean Disposal); D03 (Surface Impoundment); D04 (Other-specify).
- NOTE: For interstate shipments you may be required to comply with the manifesting requirements of both the consignee and generator states regarding the completion of specific information included in lettered items A-K. Please check with both generator and consignee states for specific requirements. New Jersey requires that all information be filled in except for item "G".

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimates including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.





Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

*Form Approved.*

OMB No. 2050-0039.

**NJA 5237312**



## GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could make you subject to civil or criminal liabilities as specified in the New Jersey Hazardous Waste Regulations.

### INSTRUCTIONS-IMPORTANT:

#### READ ALL INSTRUCTIONS BEFORE COMPLETING

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The New Jersey manifest contains 8 copies. **ALL COPIES MUST BE LEGIBLE.** This form is designed for use on a 12 pitch (elite) typewriter; a firm ball point pen may also be used only if you press down HARD. The 8 copies must be filed with the appropriate party as they are completed. **COPY DISTRIBUTION** is as follows:

- ORIGINAL:** **DESTINATION STATE**-TSDF must mail original to the state regulatory agency where the facility is located.
- COPY 2:** **GENERATOR STATE**-The TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3:** **GENERATOR COPY**-The TSDF mails this copy back to the generator of the waste.
- COPY 4:** **TSDF COPY**-TSDF keeps this copy for his records.
- COPY 5:** **TRANSPORTER COPY**-The transporter keeps this copy for his records.  
**NOTE:** If a *continuing transporter* is used the generator is responsible for supplying him with a legible photocopy, which must contain required signatures.
- COPY 6:** **DESTINATION STATE**-The generator mails this copy to the state regulatory agency where the designated facility (TSDF) is located.
- COPY 7:** **GENERATOR STATE**-The generator mails this copy to the state regulatory agency where the waste was generated.
- COPY 8:** **GENERATOR COPY**-the generator keeps this copy for his records.  
**ALL 8 COPIES MUST BE LEGIBLE**

### MANIFEST FORM ACQUISITION

1. If the destination (consignment) state supplies a manifest & requires its use, then the generator is obligated to obtain the manifest from that state.
2. If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest from the generator state.
3. If neither the generator state or the consignment state supplies the manifest, then the generator may obtain the manifest from any source.

### GENERATOR SECTION

- Item 1:** **GENERATOR'S EPA ID NO.-MANIFEST DOCUMENT NO.**-Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest, for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2:** **PAGE 1 Of** Enter the total number of pages used to complete this manifest; i.e. the first page plus the number of continuation sheets, if any.
- Item 3:** **GENERATOR'S NAME & MAILING ADDRESS**-Enter the name (as notified to EPA) & mailing address of the generator. The address should be the location that will manage the returned manifest forms.
- Item 4:** **GENERATOR'S PHONE NUMBER**-Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5:** **TRANSPORTER 1 COMPANY NAME**-Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6:** **US EPA ID NUMBER**-Enter the EPA identification number of the first transporter identified in item 5.
- Item 7:** **TRANSPORTER 2 COMPANY NAME**-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste, if more than two (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8:** **US EPA ID NUMBER**-If a second transporter is used, enter the EPA identification number of the second transporter identified in item 7.
- Item 9:** **DESIGNATED FACILITY NAME & SITE ADDRESS**-Enter the company name and site address (as notified to the EPA) of the treatment, storage, or disposal facility (TSDF) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10:** **EPA ID NUMBER**-Enter the EPA identification number of the designated TSDF (or waste reuse facility) listed in item 9.
- Item 11:** **USDOT DESCRIPTION**-Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a n.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than 4 wastes are being shipped, a second manifest or continuation sheets should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12:** **CONTAINERS (NO. & TYPE)**-Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of container used:

**TABLE 1  
CONTAINER TYPES**

DM-Metal drums, barrels, kegs  
DW-Wooden drums, barrels, kegs  
DF-Fiberboard or plastic drums, barrels, kegs  
TP-Tanks portable  
TT-Cargo tanks (Tank trucks)  
TC-Tank cars  
DT-Dump truck  
CY-Cylinders  
CM-Metal boxes, cartons, cases (including roll-offs)  
CW-Wooden boxes, cartons, cases  
CF-Fiber or plastic boxes, cartons, cases  
BA-Burlap, cloth, paper/plastic bags

- Item 13:** **TOTAL QUANTITY**-Enter the total quantity of waste described on each line. **DO NOT USE FRACTIONS**
- Item 14:** **UNIT (Wt./Vol.)**-Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line.

**TABLE II  
UNITS OF MEASURE**

G-Gallons (liquids only)  
P-Pounds  
T-Tons (2000 lbs.)  
Y-Cubic yards  
L-Liters (liquids only)  
K-Kilograms  
M-Metric Tons (1000 kg)  
N-Cubic meters

- Item 15:** **SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION**-Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information, if any. If an alternate facility is designated, note it here. For **INTERNATIONAL SHIPMENTS**, generators must enter the point of departure (city & state) in this space. This space may also be used for emergency response telephone numbers, and any other information the generator is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and USDOT hazardous materials.
- Item 16:** **GENERATOR'S CERTIFICATION** - The Generator must read, sign (by hand) and date the certification. This must be done the day the transporter picks up the waste shipment (date of receipt by transporter). If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, air) inserted in the space. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g. "and rail") in this space.
- Item A:** **STATE MANIFEST DOCUMENT NUMBER** - Number preprinted by New Jersey except on the continuation sheets. Enter this number on each continuation sheet attached to a manifest.
- Item B:** **STATE GEN ID** -The State Generator ID is the street address of the waste generation site. If the mailing address and the site address are the same, enter "same".
- Item C:** **STATE TRAN #1 ID**-Enter the New Jersey state permit number. This must include both the transporter's permit number and the decimal number of the hazardous waste transport unit or hazardous waste vehicle which contains the waste. For rail shipment(s) enter the alpha numeric I.D. number assigned to the railcar in lieu of the decimal number.
- Item D:** **TRANSPORTER PHONE**-Enter a telephone number with area code where an authorized agent of the transporter can be reached.
- Item E:** **STATE TRAN #2 ID**-If applicable, enter the New Jersey State permit number of the waste carrying portion of the second vehicle.
- Item F:** **TRANSPORTER PHONE**-If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.
- Item G:** **STATE FACILITY'S ID**-No entry is required by New Jersey.
- Item H:** **FACILITY PHONE**-Enter a telephone number with area code of the TSDF designated to receive the waste listed on the manifest.
- Item I:** **WASTE NO.**-Enter the 4-digit hazardous waste number as it appears in N.J.A.C. 7:26G-5.1 et seq. (For example "K047" is the waste number designated for pink/red water from TNT operations.) The proper waste number that accurately describes the shipment, shall be determined according to this hierarchy at N.J.A.C. 7:26G-6.2.
- Item J:** **ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE**-Enter description of analysis for any waste which does not have a complete USDOT shipping description or has an n.o.s. designation. Enter a general description of the waste stream. (i.e. groundwater contaminated with creosote and copper sulfate). Additionally, for any n.o.s. entry in item 11 which does not conform to the requirements at 49 CFR 172.203(K) enter the two components, and their percentages, which most predominantly contribute to the hazards of the mixture or solution. Enter the physical state (S = Solid, L = Liquid, G = Gas, SL = Sludge) EPA hazard codes (I = Ignitable, C = Corrosive, R = Reactive, E = Acute Hazardous, T = Toxic). Enter additional information as required by the waste code hierarchy at N.J.A.C. 7:26G-6.2.

### TRANSPORTER SECTION

It is a violation by the transporter if he accepts hazardous waste from a generator who fails to properly complete the manifest, transports waste to an unauthorized facility, and/or fails to obtain the date and handwritten signature of the next hauler owner/operator of the TSD facility on the manifest.

- Item 17:** **TRANSPORTER 1 ACKNOWLEDGEMENT**-Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.
- Item 18:** **TRANSPORTER 2 ACKNOWLEDGEMENT**-If applicable, follow instructions for item 17 for the second transporter.
- NOTE:** **ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.**

### DESIGNATED FACILITY (TSDF) SECTION

- Item 19:** **DISCREPANCY INDICATION SPACE**-The authorized representative of the designated facility must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected wastes. Owners and operators of facilities located in authorized States (i.e., those States that received authorization from the U.S. EPA to administer the hazardous waste program) should contact their State agency for information on State Discrepancy Report requirements.
- Item 20:** **FACILITY OWNER/OPERATOR CERTIFICATION**-Print or type the name of the person receiving the waste on behalf of the owner/operator of the designated TSDF. That person must acknowledge receiving the waste described on the manifest by signing and entering the date of receipt.
- Item K:** **HANDLING CODES-TSDF SHOULD COMPLETE**-Enter the ultimate handling method utilized at the designated facility for each waste. Only the following process codes may be used: Storage=S01 (container); S02 (Tank); S04 (Surface Impoundment); S05 (Other-specify); Treatment=T01 (Tank); T02 (Surface Impoundment); T03 (Incinerator); T04 (Other-specify); Disposal=D79 (Injection Well); D80 (Landfill); D81 (Land Application); D82 (Ocean Disposal); D83 (Surface Impoundment); D84 (Other-specify).
- \*NOTE** For interstate shipments you may be required to comply with the manifesting requirements of both the consignment and generator states regarding the completion of specific information included in lettered items A-K. Please check with both generator and consignment states for specific requirements. New Jersey requires that all information be filled in except for item "G".

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimates including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.



DuPont Environmental Treatment

# Notification and Certification Form

OW/DW No. OW10502

Release No. \_\_\_\_\_

(Please fill in)

## Chambers Works Wastewater Treatment Facility Land Disposal Restrictions

1. Generator's EPA ID No. NYD 072 710 502

Hazardous Waste Manifest No. NJA 52 37312

Generator US EPA Reg II-Westwood Chemical Corp.

Generators Address 46 Tower Drive,  
Middletown, NY 10941

Manifest Page No./Line Letter \_\_\_\_\_

(for drummed aqueous waste only)

Note: The DuPont Chambers Works Wastewater Treatment Plan (WWTP) is regulated under the Clean Water Act.

2. Is waste analysis information attached? ☐ Yes ☒ Not Available

3. In Table A, check (if applicable) the characteristic U.S. EPA hazardous waste codes that apply to this waste. For each waste code checked, identify whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed based on the options found on page 2.

TABLE A

Check Waste Code	U.S. EPA Hazardous Waste Code	Subcategory	Waste-water*	Non-Waste-water*	How must the waste be managed?
			(Check only one)		(Enter the letter from page 2)
<input type="checkbox"/>	D001	Low TOC (<10% TOC)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D001	High TOC ( 10% TOC)	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D001	Oxidizer	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Acid (pH ...2)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Alkaline (pH 12.5)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Other Corrosives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Sulfides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Cyanides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Water reactive	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Explosives (pretreated)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Other reactives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D004	Arsenic	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D005	Barium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D006	Cadmium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D007	Chromium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D008	Lead	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D009	Mercury	<input type="checkbox"/>	NA	
<input type="checkbox"/>	D009	Low Mercury <260 mg/kg HG	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D010	Selenium	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	D011	Silver	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A

\*Wastewaters contain <1% TOC and <1% TSS>

## Chambers Works Wastewater Treatment Facility Land Disposal Restrictions (cont.)

4. In Table B, identify all additional characteristic, listed, newly identified, and newly listed U.S. EPA hazardous waste codes that apply to this waste. For each waste code, identify the subcategory, indicate whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed, based on the options below.

TABLE B

U.S. EPA Hazardous Waste Code(s) Per 40 CFR 261	Subcategory		Waste- water*	Non- Waste- water*	How must the waste be managed?  Enter the letter from options below*
	Description	None	(Check only one)		
D011		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

5. If this waste is a spent solvent (F001-F005), you **MUST** include Attachment II, Treatment Standards for F001-F005 Spent Solvents.
6. If this waste is a multisource Leachate (F039), you may include Attachment III, Treatment Standards for F039 Multisource Leachate Wastes.
7. If this waste is characteristically hazardous, you may include attachment IV, Universal Treatment Standards. You may also include Attachment IV for nonhazardous waste which was characteristically hazardous as generated but rendered nonhazardous by pretreatment.

**\*HOW MUST THE WASTE BE MANAGED?** (Choose from the following options to complete Tables A and B.)

A. Restricted waste requires treatment [40 CFR 268.7(a)(2)].

B. Restricted waste meets applicable treatment standards.

GENERATOR'S CERTIFICATION (40 CFR 268.7(a)(3)(i))

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR 268 Subpart D. I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

C. Waste is newly listed or newly identified.

D. Restricted waste is exempt from the Land Disposal Restrictions. Check the reason below and write in the date the waste is subject to prohibitions [40 CFR 268.7(a)(4)].

☐ The waste has been granted a Site-Specific Variance. \_\_\_\_\_

☐ The waste has been given a Case-by-Case Extension. \_\_\_\_\_

☐ The waste is subject to a National Capacity Variance. \_\_\_\_\_

E. Restricted waste has been pretreated to remove the hazardous characteristic and requires treatment of underlying hazardous constituents.

CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR 268.7(b)(4)(iv)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

F. Restricted waste has been pretreated on-site to remove the hazardous characteristic and to treat underlying hazardous constituents to levels in 40 CFR 268.48 Universal Treatment Standards.

CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR 268.7(b)(4)(v)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic, and that underlying hazardous constituents, as defined in §268.2(i), have been treated on-site to meet the §268.48 Universal Treatment Standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

### CERTIFICATION

I certify that, to the best of my knowledge, the information provided in this document is true, accurate, and complete.

\_\_\_\_\_  
Authorized Signature

ON-SCENE COORDINATOR  
\_\_\_\_\_  
Title

11-10-05  
\_\_\_\_\_  
Date





State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Manifest Section  
P.O. Box 414, Trenton, NJ 08625-0414

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved.

OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.							
3. Generator's Name and Mailing Address <b>US EPA Reg II-Westwood Chemical Corp. Site</b> <b>2890 Woodbridge Ave., Bldg. 209, Edison, NJ 08837</b>						A. State Manifest Document Number <b>NJA 5237312</b>									
4. Generator's Phone ( <b>908</b> ) <b>420-4514</b> <b>Attn: Dilshad Perera</b>						B. State Generator's ID-(Gen. Site Address) <b>Site: Sect 15</b>									
5. Transporter 1 Company Name <b>SJ TRANSPORTATION Co., Inc</b>						C. State Trans. ID-NJDEP <b>51032117</b>									
6. US EPA ID Number <b>4510071162191716</b>						Decal No.- <b>081771</b>									
7. Transporter 2 Company Name						D. Transporter's Phone ( <b>856</b> ) <b>769-2741</b>									
8. US EPA ID Number						E. State Trans. ID-NJDEP									
9. Designated Facility Name and Site Address <b>E.I. DuPont de Nemours and Company</b> <b>Chambers Works - Route 130</b> <b>Deepwater, NJ 08023</b>						Decal No.-									
10. US EPA ID Number <b>4510002385730</b>						F. Transporter's Phone ( )									
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) <b>HM</b>						12. Containers No. Type		13. Total Quantity	14. Unit Wt/Vol	I. Waste No.					
a.	<b>X</b>	<b>RQ, Hazardous Waste, Liquid, N.O.S., 9, NA3082, III (Silver)</b>				<b>001</b>	<b>TT</b>	<b>X5019</b>	<b>g</b>	<b>0011</b>					
b.															
c.															
d.															
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above									
a.	<b>A: App OW1002 Rel ERG171</b>					c.	a. <b>T01</b> c.								
b.						d.	b. d.								
15. Special Handling Instructions and Additional Information <b>Emergency Contact: Capital Environmental Services (302) 652-8999</b> <b>Site: 45 Tower Dr. Middletown, NY 10841</b> <b>Tractor: 1127</b> <b>Trailer: 248</b>															
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.															
Printed/Typed Name <b>DILSHAD J. PERERA</b>						Signature 		Month Day Year <b>11/10/05</b>							
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name <b>Ike McDowell</b>						Signature 		Month Day Year <b>11/10/05</b>							
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name						Signature		Month Day Year							
19. Discrepancy-Indication Space															
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name <b>ROBERT W. JORDAN</b>											Signature 		Month Day Year <b>11/10/05</b>		

# GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could make you subject to civil or criminal penalties as specified in the New Jersey Hazardous Waste Regulations.

## INSTRUCTIONS-IMPORTANT:

### READ ALL INSTRUCTIONS BEFORE COMPLETING

State & Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and if necessary the continuation sheet for both inter- and intrastate shipments. Continuation sheets may be purchased commercially and photocopied to provide copies as described below.

The New Jersey manifest contains 4 copies. ALL COPIES MUST BE LEGIBLE. This form is designed for use on a 12 pitch (fita) typewriter; a firm ball point pen may also be used only if you press down HARD. The 4 copies must be filed with the appropriate party as they are completed. COPY DISTRIBUTION is as follows:

- COPY 1: DESTINATION STATE-TSDF must mail original to the state regulatory agency where the facility is located.
- COPY 2: GENERATOR-If the TSDF mails this copy back to the state regulatory agency, the generator must also mail a copy back to the generator.
- COPY 3: GENERATOR-If the TSDF mails a copy back to the generator of the waste.
- COPY 4: TSDF-If the TSDF keeps this copy for his records.
- COPY 5: TRANSPORTER-If the transporter keeps this copy for his records.
- NOTE: If a continuing transporter is used the generator is responsible for supplying him with a legible photocopy, which must contain required signature.
- COPY 6: DESTINATION STATE-The generator mails this copy to the state regulatory agency where the designated facility (TSDF) is located.
- COPY 7: GENERATOR-If the generator mails this copy to the state regulatory agency, where the waste was generated.
- COPY 8: GENERATOR-If the generator keeps this copy for his records.

## MANIFEST FORM ACQUISITION

1. If the destination (consignment) state supplies a manifest & requires its use, then the generator is obligated to obtain the manifest from that state.
2. If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest form from the generator state.
3. If neither the generator state or the consignment state supplies the manifest, then the generator may obtain the manifest from any source.

## GENERATOR SECTION

- Item 1: GENERATOR'S EPA ID NO.-MANIFEST DOCUMENT NO.-Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2: PAGE 1 OF - Enter the total number of pages used to complete this manifest; i.e. the first page plus the number of continuation sheets, if any.
- Item 3: GENERATOR'S NAME & MAILING ADDRESS-Enter the name (as notified to EPA) & mailing address of the generator. The address should be the location that will manage the returned manifest forms.
- Item 4: GENERATOR'S PHONE NUMBER-Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5: TRANSPORTER 1 COMPANY NAME-Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6: US EPA ID NUMBER-Enter the EPA identification number of the first transporter identified in Item 5.
- Item 7: TRANSPORTER 2 COMPANY NAME-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste. If more than one (2) transporter will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8: US EPA ID NUMBER-If a second transporter is used, enter the EPA identification number of the second transporter identified in Item 7.
- Item 9: DESIGNATED FACILITY NAME & ADDRESS-Enter the company name and site address (as notified to the EPA) of the treatment, storage, or disposal facility (TSDF) designated to receive the waste listed on this manifest. The address must be the site address; it may differ from the mailing address.
- Item 10: EPA ID NUMBER-Enter the EPA identification number of the designated TSDF (or waste reuse facility) listed in Item 9.
- Item 11: USDOT DESCRIPTION-Enter the correct USDOT shipping name, hazard class or division, identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a general hazardous waste (49 CFR 172.101). For a waste with a n.o.s. description enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than 4 wastes are being shipped, a second manifest or continuation sheets should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12: CONTAINERS (NO. & TYPE)-Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of container used.

TABLE 1  
CONTAINER TYPES

- DA-Metal drums, barrels, kegs
- DW-Wooden drums, barrels, kegs
- DF-Fiberboard or plastic drums, barrels, kegs
- TP-Tanks portable
- TT-Cargo tanks (Tank trucks)
- TC-Tank cars
- DT-Dump truck
- CY-Cylinders
- CB-Metal boxes, cartons, cases (including roll-offs)
- CW-Wooden boxes, cartons, cases
- CF-Fiber or plastic boxes, cartons, cases
- BA-Burlap, cloth, paper/plastic bags

- Item 13: TOTAL QUANTITY-Enter the total quantity of waste described on each line. DO NOT USE FRACTIONS
- Item 14: UNIT (Wt/Vol.)-Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line.

- G-Gallons (liquid only)
- P-Pounds
- T-Tons (2000 lbs.)
- Y-Cubic yards
- L-Liters (liquids only)
- K-Kilograms
- M-Metric tons (1000 kg)
- R-Cubic Meters

- Item 15: SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION-Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information, if any. If an alternate facility is designated, note it here. For INTERNATIONAL SHIPMENTS, indicate the destination country (city & state) in this space. Waste may also be used for emergency response telephone numbers, and any other information the generator is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and USDOT hazardous materials.

- Item 16: GENERATOR'S CERTIFICATION-The Generator must read, sign (by hand) and date the certification. This must be done the day the transporter picks up the waste shipment (date of receipt by transporter). If a mode other than highway is used, the word "Highway" should be lined out and the appropriate mode (rail, water, air) inserted in the space. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g. "land rail") in this space.
- Item A: STATE MANIFEST DOCUMENT NUMBER - Number preprinted by New Jersey except on the continuation sheet. Enter this number on each continuation sheet attached to a manifest.
- Item B: STATE GEN ID - The State Generator ID is the street address of the waste generation site. If the mailing address and the site address are the same, enter "same".
- Item C: STATE TRAN ID - Enter the New Jersey state permit number. This must include both the transporter's permit number and the fiscal number of the hazardous waste transport unit or hazardous waste vehicle which contains the waste. For rail shipment(s) enter the alpha numeric ID number assigned to the railcar in lieu of the fiscal number.

- Item D: TRANSPORTER PHONE-Enter a telephone number with area code where an authorized agent of the transporter can be reached.
- Item E: STATE TRAN #2 ID - If applicable, enter the New Jersey State permit number of the waste carrying portion of the second vehicle.
- Item F: TRANSPORTER PHONE - If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.

- Item G: STATE FACILITY ID - No entry is required by New Jersey.
- Item H: FACILITY PHONE-Enter a telephone number with area code of the TSDF designated to receive the waste listed on the manifest.

- Item I: WASTE NO. - Enter the 4-digit hazardous waste number as it appears in N.J.A.C. 7:26G-5.1 et seq. (For example "104" is the waste number designated for petroleum water from TWT operations.) The proper waste number that accurately describes the shipment, shall be determined according to the hierarchy at N.J.A.C. 7:26G-6.2.

- Item J: ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE-Enter description of analysis for any waste which does not have a complete USDOT shipping description or has an n.o.s. designation. Enter a general description of the waste stream, (i.e. groundwater contaminated with creosote and copper sulfate). Additionally, for any n.o.s. entry in Item 11 which does not conform to the requirements of 49 CFR 172.202(K) enter the two components, and their percentages, which most predominantly contribute to the hazard of the mixture or solution. Enter the physical state (S = Solid, L = Liquid, G = Gas, SL = Sludge) EPA hazard codes (I = Ignitable, C = Corrosive, R = Reactive, E = TOLP, H = Acute Hazard, T = Toxic). Enter additional information as required by the waste code hierarchy at N.J.A.C. 7:26G-6.2.

## TRANSPORTER SECTION

It is a violation by the transporter if he accepts hazardous waste from a generator who fails to properly complete the manifest, transports waste to an unauthorized facility, and/or fails to obtain the date and handwritten signature of the next hauler owner/operator of the TSD facility on the manifest.

- Item 17: TRANSPORTER 1 ACKNOWLEDGEMENT-Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.
- Item 18: TRANSPORTER 2 ACKNOWLEDGEMENT-If applicable, follow instructions for Item 17 for the second transporter.
- NOTE: ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.

## DESIGNATED FACILITY (TSD) SECTION

- Item 19: DISCREPANCY IN DESCRIPTION SPACE-The authorized representative of the designated facility must use this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected materials. Owners and operators of facilities located in authorized States (i.e. those States that received authorization from the U.S. EPA to administer the hazardous waste program) should contact their State agency for information on State Discrepancy Report requirements.
- Item 20: FACILITY OWNER/OPERATOR CERTIFICATION-Print or type the name of the person receiving the waste on behalf of the designated facility. That person must acknowledge receiving the waste described on the manifest by signing and entering the date of receipt.
- Item K: HANDLING CODES-PROOF SHOULD COMPLETE-Enter the ultimate handling method utilized at the designated facility for each waste. Only the following process codes may be used: Storage=S01 (container); S02 (Tank); S04 (Surface Impoundment); S05 (Other-specific); Treatment=T01 (Tank); T02 (Surface Impoundment); T03 (Other-specific); Disposal=D79 (Injection Well); D80 (Landfill); D81 (Land Application); D82 (Ocean Disposal); D83 (Surface Impoundment); D84 (Other-specific).
- NOTE: For interstate shipments you may be required to comply with the manifesting requirements of both the consignment and generator states regarding the completion of specific information included in lettered items A-K. Please check with both generator and consignment states for specific requirements. New Jersey requires that all information be filled in except for item "G".

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimates including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.



State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Manifest Section  
P.O. Box 414, Trenton, NJ 08625-0414

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved

OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NJ 000727105023		Manifest Document No. 1111		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address US EPA Reg H-Wholesaler Chemical Corp. Site 2350 Woodbridge Ave., Cling. Bldg. Edison, NJ 08837						A. State Manifest Document Number <b>NJA 5237313</b>							
4. Generator's Phone (908) 422-4510 Attn: Richard Perera						B. State Generator's ID-(Gen. Site Address)							
5. Transporter 1 Company Name ST Transportation Inc						6. US EPA ID Number NJ00071629776							
7. Transporter 2 Company Name						8. US EPA ID Number							
9. Designated Facility Name and Site Address S.I. DuPont de Nemours and Company Chemical Works - Route 130 Deepwater, NJ 08023						10. US EPA ID Number NJ0002386780							
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		1. Waste No.	
a. 1 PG. Hazardous Waste, Liquid, N.O.S., 9 HAZ002 (9000)						001 TT		3474		L		1111	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above A. Aqueous Solution of 10% UREA						K. Handling Codes for Wastes Listed Above							
a.						c.							
b.						d.							
15. Special Handling Instructions and Additional Information Emergency Contact: Capital Emergency Services (609) 657-6000 One 45 Tenth St., Middletown, NJ 08041						Tractor							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						Tractor							
Printed/Typed Name DILSHAD J. PERERA						Signature [Signature] Month Day Year 11/1/05							
17. Transporter 1 Acknowledgement of Receipt of Materials						Tractor							
Printed/Typed Name Eugene Wilson						Signature [Signature] Month Day Year 11/1/05							
18. Transporter 2 Acknowledgement of Receipt of Materials						Tractor							
Printed/Typed Name						Signature Month Day Year							
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name						Signature Month Day Year							

NJA 5237313

## GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could make you subject to civil or criminal liabilities as specified in the New Jersey Hazardous Waste Regulations.

### INSTRUCTIONS-IMPORTANT:

#### READ ALL INSTRUCTIONS BEFORE COMPLETING

State & Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and if necessary the continuation sheet for both inter- and intrastate shipments. Continuation sheets may be purchased commercially and photocopied to provide copies as described below.

The New Jersey manifest contains 8 copies. **ALL COPIES MUST BE LEGIBLE.** This form is designed for use on a 12 pitch (elite) typewriter; a firm ball point pen may also be used only if you press down HARD. The 8 copies must be filed with the appropriate party as they are completed. **COPY DISTRIBUTION** is as follows:

- ORIGINAL:** **DESTINATION STATE-TSDF** must mail original to the state regulatory agency where the facility is located.
- COPY 2:** **GENERATOR STATE**-The TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3:** **GENERATOR COPY**-The TSDF mails this copy back to the generator of the waste.
- COPY 4:** **TSDF COPY**-TSDF keeps this copy for his records.
- COPY 5:** **TRANSPORTER COPY**-The transporter keeps this copy for his records.  
NOTE: If a continuing transporter is used the generator is responsible for supplying him with a legible photocopy, which must contain required signatures.
- COPY 6:** **DESTINATION STATE**-The generator mails this copy to the state regulatory agency where the designated facility (TSDF) is located.
- COPY 7:** **GENERATOR STATE**-The generator mails this copy to the state regulatory agency where the waste was generated.
- COPY 8:** **GENERATOR COPY**-the generator keeps this copy for his records.

#### ALL 8 COPIES MUST BE LEGIBLE

### MANIFEST FORM ACQUISITION

- If the destination (consignment) state supplies a manifest & requires its use, then the generator is obligated to obtain the manifest from that state.
- If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest from the generator state.
- If neither the generator state or the consignment state supplies the manifest, then the generator may obtain the manifest from any source.

### GENERATOR SECTION

- Item 1:** **GENERATOR'S EPA ID NO.-MANIFEST DOCUMENT NO.**-Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest, for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2:** **PAGE 1 Of** Enter the total number of pages used to complete this manifest; i.e. the first page plus the number of continuation sheets, if any.
- Item 3:** **GENERATOR'S NAME & MAILING ADDRESS**-Enter the name (as notified to EPA) & mailing address of the generator. The address should be the location that will manage the returned manifest forms.
- Item 4:** **GENERATOR'S PHONE NUMBER**-Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5:** **TRANSPORTER 1 COMPANY NAME**-Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6:** **US EPA ID NUMBER**-Enter the EPA identification number of the first transporter identified in item 5.
- Item 7:** **TRANSPORTER 2 COMPANY NAME**-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste, if more than two (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8:** **US EPA ID NUMBER**-If a second transporter is used, enter the EPA identification number of the second transporter identified in item 7.
- Item 9:** **DESIGNATED FACILITY NAME & SITE ADDRESS**-Enter the company name and site address (as notified to the EPA) of the treatment, storage, or disposal facility (TSDF) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10:** **EPA ID NUMBER**-Enter the EPA identification number of the designated TSDF (or waste reuse facility) listed in item 9.
- Item 11:** **USDOT DESCRIPTION**-Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a n.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than 4 wastes are being shipped, a second manifest or continuation sheets should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12:** **CONTAINERS (NO. & TYPE)**-Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of container used:

**TABLE 1  
CONTAINER TYPES**

DM-Metal drums, barrels, kegs  
DW-Wooden drums, barrels, kegs  
DF-Fiberboard or plastic drums, barrels, kegs  
TP-Tanks portable  
TT-Cargo tanks (Tank trucks)  
TC-Tank cars  
DT-Dump truck  
CY-Cylinders  
CM-Metal boxes, cartons, cases (including roll-offs)  
CW-Wooden boxes, cartons, cases  
CF-Fiber or plastic boxes, cartons, cases  
BA-Burlap, cloth, paper/plastic bags

- Item 13:** **TOTAL QUANTITY**-Enter the total quantity of waste described "on each" line. **DO NOT USE FRACTIONS**
- Item 14:** **UNIT (Wt./Vol.)**-Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line.

**TABLE II  
UNITS OF MEASURE**

G-Gallons (liquids only)  
P-Pounds  
T-Tons (2000 lbs.)  
Y-Cubic yards  
L-Liters (liquids only)  
K-Kilograms  
M-Metric Tons (1,000 kg)  
N-Cubic Meters

- Item 15:** **SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION**-Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information, if any. If an alternate facility is designated, note it here. For **INTERNATIONAL SHIPMENTS**, generators must enter the point of departure (city & state) in this space. This space may also be used for emergency response telephone numbers, and any other information the generator is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and USDOT hazardous materials.
- Item 16:** **GENERATOR'S CERTIFICATION** - The Generator must read, sign (by hand) and date the certification. This must be done the day the transporter picks up the waste shipment (date of receipt by transporter). If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, air) inserted in the space. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g. "and rail") in this space.
- Item A:** **STATE MANIFEST DOCUMENT NUMBER** - Number preprinted by New Jersey except on the continuation sheets. Enter this number on each continuation sheet attached to a manifest.
- Item B:** **STATE GEN ID** -The State Generator ID is the street address of the waste generation site. If the mailing address and the site address are the same, enter "same".
- Item C:** **STATE TRAN #1 ID**-Enter the New Jersey state permit number. This must include both the transporter's permit number and the decal number of the hazardous waste transport unit or hazardous waste vehicle which contains the waste. For rail shipment(s) enter the alpha numeric I.D. number assigned to the railroad in lieu of the decal number.
- Item D:** **TRANSPORTER PHONE**-Enter a telephone number with area code where an authorized agent of the transporter can be reached.
- Item E:** **STATE TRAN #2 ID**-If applicable, enter the New Jersey State permit number of the waste carrying portion of the second vehicle.
- Item F:** **TRANSPORTER PHONE**-If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.
- Item G:** **STATE FACILITY'S ID**-No entry is required by New Jersey.
- Item H:** **FACILITY PHONE**-Enter a telephone number with area code of the TSDF designated to receive the waste listed on this manifest.
- Item I:** **WASTE NO.**-Enter the 4-digit hazardous waste number as it appears in N.J.A.C. 7:26G-5.1 et. seq. (For example "X047" is the waste number designated for pink/red water from TNT operations.) The proper waste number that accurately describes the shipment, shall be determined according to the hierarchy at N.J.A.C. 7:26G-3.2.
- Item J:** **ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE**-Enter description of analysis for any waste which does not have a complete USDOT shipping description or has an n.o.s. designation. Enter a general description of the waste stream. (i.e. groundwater contaminated with cresote and copper sulfate). Additionally, for any n.o.s. entry in item 11 which does not conform to the requirements at 49 CFR 172.203(K) enter the two components, and their percentages, which most predominantly contribute to the hazards of the mixture or solution. Enter the physical state (S = Solid, L = Liquid, G = Gas, SL = Sludge) EPA hazard codes (I = Ignitable, C = Corrosive, R = Reactive, F = Toxic, H = Acute Hazardous, T = Toxic). Enter additional information as required by the waste code hierarchy at N.J.A.C. 7:26G-6.2.

### TRANSPORTER SECTION

It is a violation by the transporter if he accepts hazardous waste from a generator who fails to properly complete the manifest, transports waste to an unauthorized facility, and/or fails to obtain the date and handwritten signature of the next hauler owner/operator of the TSD facility on the manifest.

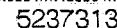
- Item 17:** **TRANSPORTER 1 ACKNOWLEDGEMENT**-Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.
- Item 18:** **TRANSPORTER 2 ACKNOWLEDGEMENT**-If applicable, follow instructions for item 17 for the second transporter.
- NOTE:** **ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.**

### DESIGNATED FACILITY (TSDF) SECTION

- Item 19:** **DISCREPANCY INDICATION SPACE**-The authorized representative of the designated facility must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected wastes. Owners and operators of facilities located in authorized States (i.e. those States that received authorization from the U.S. EPA to administer the hazardous waste program) should contact their State agency for information on State Discrepancy Report requirements.
- Item 20:** **FACILITY OWNER/OPERATOR CERTIFICATION**-Print or type the name of the person receiving the waste on behalf of the owner/operator of the designated TSDF. That person must acknowledge receiving the waste described on the manifest by signing and entering the date of receipt.
- Item K:** **HANDLING CODES-TSDF SHOULD COMPLETE**-Enter the ultimate handling method utilized at the designated facility for each waste. Only the following process codes may be used: Storage=S01 (container); S02 (Tank); S04 (Surface Impoundment); S05 (Other-specify); Treatment=T01 (Tank); T02 (Surface Impoundment); T03 (Incinerator); T04 (Other-specify); Disposal=D79 (Injection Well); D80 (Landfill); D81 (Land Application); D82 (Ocean Disposal); D83 (Surface Impoundment); D84 (Other-specify).
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1900 1901 1902 1903 1904 1905 1906 1907 1908 1909 1910 1911 1912 1913 1914 1915 1916 1917 1918 1919 1920 1921 1922 1923 1924 1925 1926 1927 1928 1929 1930 1931 1932 1933 1934 1935 1936 1937 1938 1939 1940 1941 1942 1943 1944 1945 1946 1947 1948 1949 1950 1951 1952 1953 1954 1955 1956 1957 1958 1959 1960 1961 1962 1963 1964 1965 1966 1967 1968 1969 1970 1971 1972 1973 1974 1975 1976 1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1989 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030 2031 2032 2033 2034 2035 2036 2037 2038 2039 2040 2041 2042 2043 2044 2045 2046 2047 2048 2049 2050 2051 2052 2053 2054 2055 2056 2057 2058 2059 2060 2061 2062 2063 2064 2065 2066 2067 2068 2069 2070 2071 2072 2073 2074 2075 2076 2077 2078 2079 2080 2081 2082 2083 2084 2085 2086 2087 2088 2089 2090 2091 2092 2093 2094 2095 2096 2097 2098 2099 2100 2101 2102 2103 2104 2105 2106 2107 2108 2109 2110 2111 2112 2113 2114 2115 2116 2117 2118 2119 2120 2121 2122 2123 2124 2125 2126 2127 2128 2129 2130 2131 2132 2133 2134 2135 2136 2137 2138 2139 2140 2141 2142 2143 2144 2145 2146 2147 2148 2149 2150 2151 2152 2153 2154 2155 2156 2157 2158 2159 2160 2161 2162 2163 2164 2165 2166 2167 2168 2169 2170 2171 2172 2173 2174 2175 2176 2177 2178 2179 2180 2181 2182 2183 2184 2185 2186 2187 2188 2189 2190 2191 2192 2193 2194 2195 2196 2197 2198 2199 2200 2201 2202 2203 2204 2205 2206 2207 2208 2209 2210 2211 2212 2213 2214 2215 2216 2217 2218 2219 2220 2221 2222 2223 2224 2225 2226 2227 2228 2229 2230 2231 2232 2233 2234 2235 2236 2237 2238 2239 2240 2241 2242 2243 2244 2245 2246 2247 2248 2249 2250 2251 2252 2253 2254 2255 2256 2257 2258 2259 2260 2261 2262 2263 2264 2265 2266 2267 2268 2269 2270 2271 2272 2273 2274 2275 2276 2277 2278 2279 2280 2281 2282 2283 2284 2285 2286 2287 2288 2289 2290 2291 2292 2293 2294 2295 2296 2297 2298 2299 2300 2301 2302 2303 2304 2305 2306 2307 2308 2309 2310 2311 2312 2313 2314 2315 2316 2317 2318 2319 2320 2321 2322 2323 2324 2325 2326 2327 2328 2329 2330 2331 2332 2333 2334 2335 2336 2337 2338 2339 2340 2341 2342 2343 2344 2345 2346 2347 2348 2349 2350 2351 2352 2353 2354 2355 2356 2357 2358 2359 2360 2361 2362 2363 2364 2365 2366 2367 2368 2369 2370 2371 2372 2373 2374 2375 2376 2377 2378 2379 2380 2381 2382 2383 2384 2385 2386 2387 2388 2389 2390 2391 2392 2393 2394 2395 2396 2397 2398 2399 2400 2401 2402 2403 2404 2405 2406 2407 2408 2409 2410 2411 2412 2413 2414 2415 2416 2417 2418 2419 2420 2421 2422 2423 2424 2425 2426 2427 2428 2429 2430 2431 2432 2433 2434 2435 2436 2437 2438 2439 2440 2441 2442 2443 2444 2445 2446 2447 2448 2449 2450 2451 2452 2453 2454 2455 2456 2457 2458 2459 2460 2461 2462 2463 2464 2465 2466 2467 2468 2469 2470 2471 2472 2473 2474 2475 2476 2477 2478 2479 2480 2481 2482 2483 2484 2485 2486 2487 2488 2489 2490 2491 2492 2493 2494 2495 2496 2497 2498 2499 2500 2501 2502 2503 2504 2505 2506 2507 2508 2509 2510 2511 2512 2513 2514 2515 2516 2517 2518 2519 2520 2521 2522 2523 2524 2525 2526 2527 2528 2529 2530 2531 2532 2533 2534 2535 2536 2537 2538 2539 2540 2541 2542 2543 2544 2545 2546 2547 2548 2549 2550 2551 2552 2553 2554 2555 2556 2557 2558 2559 2560 2561 2562 2563 2564 2565 2566 2567 2568 2569 2570 2571 2572 2573 2574 2575 2576 2577 2578 2579 2580 2581 2582 2583 2584 2585 2586 2587 2588 2589 2590 2591 2592 2593 2594 2595 2596 2597 2598 2599 2600 2601 2602 2603 2604 2605 2606 2607 2608 2609 2610 2611 2612 2613 2614 2615 2616 2617 2618 2619 2620 2621 2622 2623 2624 2625 2626 2627 2628 2629 2630 2631 2632 2633 2634 2635 2636 2637 2638 2639 2640 2641 2642 2643 2644 2645 2646 2647 2648 2649 2650 2651 2652 2653 2654 2655 2656 2657 2658 2659 2660 2661 2662 2663 2664 2665 2666 2667 2668 2669 2670 2671 2672 2673 2674 2675 2676 2677 2678 2679 2680 2681 2682 2683 2684 2685 2686 2687 2688 2689 2690 2691 2692 2693 2694 2695 2696 2697 2698 2699 2700 2701 2702 2703 2704 2705 2706 2707 2708 2709 2710 2711 2712 2713 2714 2715 2716 2717 2718

1-TSD MAIL TO-TSD'S STATE

2000年12月15日





DuPont Environmental Treatment

# Notification and Certification Form

OW/DW No. OW10502

Release No. 8

(Please fill in)

## Chambers Works Wastewater Treatment Facility Land Disposal Restrictions

1. Generator's EPA ID No. NYD 072 710 502

Hazardous Waste Manifest No. NJA 52 37313

Generator US EPA Reg II-Westwood Chemical Corp.

Generators Address 46 Tower Drive,

Manifest Page No./Line Letter \_\_\_\_\_

Middletown, NY 10941

(for drummed aqueous waste only)

Note: The DuPont Chambers Works Wastewater Treatment Plan (WWTP) is regulated under the Clean Water Act.

2. Is waste analysis information attached? ☐ Yes ☒ Not Available

3. In Table A, check (if applicable) the characteristic U.S. EPA hazardous waste codes that apply to this waste. For each waste code checked, identify whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed based on the options found on page 2.

TABLE A

Check Waste Code	U.S. EPA Hazardous Waste Code	Subcategory	Waste-water*	Non-Waste-water*	How must the waste be managed?
			(Check only one)		(Enter the letter from page 2)
<input type="checkbox"/>	D001	Low TOC (<10% TOC)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D001	High TOC ( 10% TOC)	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D001	Oxidizer	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Acid (pH ...2)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Alkaline (pH 12.5)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D002	Other Corrosives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Sulfides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Reactive Cyanides	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Water reactive	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Explosives (pretreated)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D003	Other reactives	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D004	Arsenic	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D005	Barium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D006	Cadmium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D007	Chromium	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D008	Lead	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	D009	Mercury	<input type="checkbox"/>	NA	
<input type="checkbox"/>	D009	Low Mercury <260 mg/kg HG	NA	<input type="checkbox"/>	
<input type="checkbox"/>	D010	Selenium	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	D011	Silver	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A

\*Wastewaters contain <1% TOC and <1% TSS>

# Chambers Works Wastewater Treatment Facility Land Disposal Restrictions (cont.)

4. In Table B, identify all additional characteristic, listed, newly identified, and newly listed U.S. EPA hazardous waste codes that apply to this waste. For each waste code, identify the subcategory, indicate whether the waste is a wastewater or nonwastewater, and indicate how the waste must be managed, based on the options below.

TABLE B

Indicate how the waste must be managed:

TABLE B					
U.S. EPA Hazardous Waste Code(s) Per 40 CFR 261	Subcategory		Waste- water*	Non- Waste- water*	How must the waste be managed? Enter the letter from options below*
			(Check only one)		
	Description	None			A
D011		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

H. Treatment Standards for F001-F005 Spent Solvents

5. If this waste is a spent solvent (F001-F005), you **MUST** include Attachment II, Treatment Standards for F001-F005 Spent Solvents.
6. If this waste is a multisource Leachate (F039), you may include Attachment III, Treatment Standards for F039 Multisource Leachate Wastes.
7. If this waste is characteristically hazardous, you may include attachment IV, Universal Treatment Standards. You may also include Attachment IV for nonhazardous waste which was characteristically hazardous as generated but rendered nonhazardous by pretreatment.

**\*HOW MUST THE WASTE BE MANAGED?** (Choose from the following options to complete Tables A and B.)

- A. Restricted waste requires treatment [40 CFR 268.7(a)(2)].

- B. Restricted waste meets applicable treatment standards.

**GENERATOR'S CERTIFICATION** (40 CFR 268.7(a)(3)(i))

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR 268 Subpart D. I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

- C. Waste is newly listed or newly identified.

- D. Restricted waste is exempt from the Land Disposal Restrictions. Check the reason below and write in the date the waste is subject to prohibitions [40 CFR 268.7(a)(4)].

☐ The waste has been granted a Site-Specific Variance.

☐ The waste has been given a Case-by-Case Extension.

☐ The waste is subject to a National Capacity Variance.

- E. Restricted waste has been pretreated to remove the hazardous characteristic and requires treatment of underlying hazardous constituents. **CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS** [40 CFR 268.7(b)(4)(iv)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

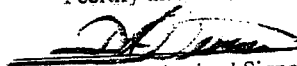
- F. Restricted waste has been pretreated on-site to remove the hazardous characteristic and to treat underlying hazardous constituents to levels in 40 CFR 268.48 Universal Treatment Standards.

**CHARACTERISTIC WASTE - UNDERLYING HAZARDOUS CONSTITUENTS** [40 CFR 268.7(b)(4)(v)]

I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic, and that underlying hazardous constituents, as defined in §268.2(i), have been treated on-site to meet the §268.48 Universal Treatment Standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

## CERTIFICATION

I certify that, to the best of my knowledge, the information provided in this document is true, accurate, and complete.

  
Authorized Signature

ON-SCENE COORDINATOR  
Title

11-11-05  
Date



TRACTOR # \_\_\_\_\_

SJ TRANSPORTATION CO., INC.

1175 U.S. ROUTE 46

P.O. BOX 169

WOODSTOWN, NJ 08098

(856) 769-2741

WWW.SJTRANSPORTATION.COM

ORDER # 13378

PRINTED 11/16/2005

BOOKED BY KELLE

NJA

MANIFEST # 5237313TRAILER # TV 217DRIVER JASON WILSON ①

SHIPPER:

CONSIGNEE:

DUSENID -1 US EPA REG. II W  
46 TOWER DR.  
MIDDLETOWN, NY 10941DUPONCE 1 DUPONT  
CHAMBERWORKS, P  
DEEPWATER, NJ 08023DAVE BOFINGER  
(845) 892-9861BRENDA SIMMONS  
(856) 546-2969

NJD002385730

TRAILER TYPE: TVAC

PICKUP DATE 11/11/2005

DELIVER DATE 11/11/2005

GROSS WT \_\_\_\_\_

UNIT:

TIME 7:00:00 AM

TIME 1:00:00 PM

TARE WT \_\_\_\_\_

IN # \_\_\_\_\_

OUT # \_\_\_\_\_

IN 6:45 OUT 9:00

IN \_\_\_\_\_ OUT \_\_\_\_\_

NET WT \_\_\_\_\_

COMMENTS (EXPLAIN DELAY AND DISCREPANCIES):

COMMENTS (EXPLAIN DELAY AND DISCREPANCIES):

empty Frac Tank, stand by for cleaning and  
emptying liquid from Frac Tank

DESCRIPTION: 20 Hazardous Waste Liquid n.o.s.  
(S. lver)  
9. NA3082 PG II

GAL LOAD 3674

ORDER REF #'S:

OW# : 10502 RE-8

27 1/2" Dry3217/081680

SPECIAL INSTRUCTIONS:

VAC FROM FRAC TANK/SEND SAMPLE JAR

BILL TO:

VACUUM YES ☒ VACUUM NO \_\_\_\_\_VACUUM START 7:00VACUUM FINISH 8:45

CONTACT : VICKI 302-652-8999 X 101

CAPITOL ENVIRON

115 C TROLLEY SC

WILMINGTON, DE 19806

I, THE UNDERSIGNED, CERTIFY THE LISTED INFORMATION AND DEMURAGE TIME AND IS TRUE AND COMPLETE.

SHIPPER Del. before 11-11-05 DATE 11-11-05

CONSIGNEE \_\_\_\_\_ DATE \_\_\_\_\_

PERSONNEL ARE AVAILABLE 24 HOURS/DAY WITH KNOWLEDGE OF THE HAZARDS OF THE CARRIER : SJ TRANSPORTATION CO., INC. (800) 524-2552  
MATERIAL AND EMERGENCY RESPONSE INFORMATION OR WHO HAS ACCESS TO A PERSON : PER : Jason Wilson  
WITH THAT KNOWLEDGE. DATE : 11-11-05

WHITE COPY - S-J, YELLOW COPY - DRIVER, PINK COPY - TSP, BLUE COPY - CUSTOMER



10502/8

State of New Jersey  
Department of Environmental Protection  
Hazardous Waste Regulation Program  
Manifest Section  
P.O. Box 414, Trenton, NJ 08625-0414

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved

OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>N Y D 0 7 2 7 1 0 5 0 2 3 7 3 1 3</b>		Manifest Document No. <b>7 3 1 3</b>		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>US EPA Reg II Westwood Chemical Corp. Site 2000 Woodbridge Ave., Bldg. 209, Edison, NJ 08837</b>						A. State Manifest Document Number <b>NJA 5237313</b>			
4. Generator's Phone ( <b>908</b> ) <b>420-4514</b> <b>Attn: Dilshad Perera</b>						B. State Generator's ID (Gen. Site Address) <b>Site Sect 15</b>			
5. Transporter 1 Company Name <b>S J Transportation Co Inc</b>						C. State Trans. ID-NJDEP <b>5 0 3 2 1 7</b>			
6. US EPA ID Number <b>1 7 3 1 0 7 1 1 6 2 9 9 7 6</b>						Decal No.- <b>0 8 1 6 8 0</b>			
7. Transporter 2 Company Name						D. Transporter's Phone ( <b>856</b> ) <b>769-2741</b>			
8. US EPA ID Number						E. State Trans. ID-NJDEP			
9. Designated Facility Name and Site Address <b>E.I. DuPont de Nemours and Company Chambers Works - Route 130 Deepwater, NJ 08023</b>						Decal No.-			
10. US EPA ID Number <b>N J D 1 0 0 2 3 8 5 7 3 0</b>						F. Transporter's Phone ( )			
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) <b>HM</b>						G. State Facility's ID			
12. Containers						H. Facility's Phone ( <b>856 640-2773</b> )			
No.						Type			
13. Total Quantity						14. Unit Wt/Vol			
1. Waste No.									
a.	<b>X</b>	<b>RQ, Hazardous Waste, Liquid, N.O.S., 9, NA3082, III (Silver)</b>				<b>001</b>	<b>TT</b>	<b>3674 G</b>	<b>D011</b>
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above <b>A: App# OW10502 Rel 8 ERG171</b>						K. Handling Codes for Wastes Listed Above <b>T 1 0 1 1</b>			
a.						c.			
b.						d.			
15. Special Handling Instructions and Additional Information <b>Emergency Contact: Capitol Environmental Services (302) 662-8999</b> <b>Site: 46 Tower Dr. Middletown, NY 10941</b> <b>Job# ROAN-SSCH- Tractor:</b> <b>Trailer:</b>									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name <b>DILSHAD J. PERERA</b>						Signature <i>[Signature]</i> Month Day Year <b>11/1/05</b>			
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name <b>Jason Wilton</b>						Signature <i>[Signature]</i> Month Day Year <b>11/1/05</b>			
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name						Signature Month Day Year			
19. Discrepancy Indication Space <b>ITEM B SHOULD READ 46 TOWER DR., MIDDLETOWN, NY 10941</b> <b>ITEM J ADDITIONAL DESCRIPTIONS MISSING</b>									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name <b>ROBERT MILL</b>									
Signature <i>[Signature]</i> Month Day Year <b>11/1/05</b>									

EPA Form 8700-22

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

3-TSD MAIL TO-GENERATOR

NJ 5237313

## GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could make you subject to civil or criminal liabilities as specified in the New Jersey Hazardous Waste Regulations.

## INSTRUCTIONS-IMPORTANT

### READ ALL INSTRUCTIONS BEFORE COMPLETING

State & Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and, if necessary, the continuation sheet for both inter- and intrastate shipments. Continuation sheets may be purchased commercially and photocopied to provide copies as described below.

The New Jersey manifest contains 3 copies. ALL COPIES MUST BE LEGIBLE. This form is designed for use on a 12 inch (30.5 cm) wide paper. A firm ball point pen may also be used only if you press down HARD. The 3 copies must be filed with the appropriate party as they are completed. COPY DISTRIBUTION is as follows:

- ORIGINAL: DESTINATION STATE-TSDF must mail original to the state regulatory agency where the facility is located.
- COPY 2: GENERATOR STATE-The TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3: GENERATOR COPY-The TSDF mails this copy back to the generator of the waste.
- COPY 4: TSD COPY-TSDF keeps this copy for his records.
- COPY 5: TRANSPORTER COPY-The transporter keeps this copy for his records.
- NOTE: If a continuing transporter is used the generator is responsible for supplying him with a legible photocopy, which must contain required signatures.
- COPY 6: DESTINATION STATE-The generator mails this copy to the state regulatory agency where the designated facility (TSD) is located.
- COPY 7: GENERATOR STATE-The generator mails this copy to the state regulatory agency where the waste was generated.
- COPY 8: GENERATOR COPY-the generator keeps this copy for his records.
- ALL 3 COPIES MUST BE LEGIBLE

## MANIFEST FORM ACQUISITION

- If the destination (consigning) state supplies a manifest & requires its use, then the generator is obligated to obtain that manifest from that state.
- If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest form from the generator state.
- If neither the generator state or the consigning state supplies the manifest, then the generator may obtain the manifest from any source.

## GENERATOR SECTION

- Item 1: GENERATOR'S EPA ID NO.-MANIFEST DOCUMENT NO.-Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest, for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2: PAGE 1 CI-Enter the total number of pages used to complete this manifest; i.e. the first page plus the number of continuation sheets, if any.
- Item 3: GENERATOR'S NAME & MAILING ADDRESS-Enter the name (as notified to EPA) & mailing address of the generator. The address should be the location that will manage the returned manifest forms.
- Item 4: GENERATOR'S PHONE NUMBER-Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5: TRANSPORTER 1 COMPANY NAME-Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6: US EPA ID NUMBER-Enter the EPA identification number of the first transporter identified in item 5.
- Item 7: TRANSPORTER 2 COMPANY NAME-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste. If more than two (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8: US EPA ID NUMBER-If a second transporter is used, enter the EPA identification number of the second transporter identified in item 7.
- Item 9: DESIGNATED FACILITY NAME & SITE ADDRESS-Enter the company name and site address (as notified to EPA) of the treatment, storage, or disposal facility (TSD) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10: EPA ID NUMBER-Enter the EPA identification number of the designated TSD (or waste reuse facility) listed in item 9.
- Item 11: USDOT DESCRIPTION-Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a n.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than 4 wastes are being shipped, a second manifest or continuation sheet should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12: CONTAINERS (NO. & TYPE)-Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of container used:

TABLE 1  
CONTAINER TYPES

- DM-Metal drums, barrels, kegs  
DW-Wooden drums, barrels, kegs  
DF-Fiberboard or plastic drums, barrels, kegs  
TP-Tanks portable  
LT-Cargo tanks (Tank trucks)  
TC-Tank cars  
DT-Dump truck  
CY-Cylinders  
CB-Metal boxes, cartons, cases (including roll-offs)  
CW-Wooden boxes, cartons, cases  
CF-Fiber or plastic boxes, cartons, cases  
BA-Burlap, cloth, paper/plastic bags

- Item 13: TOTAL QUANTITY-Enter the total quantity of waste described on each line. DO NOT USE FRACTIONS
- Item 14: UNIT (Wt./Vol.)-Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line.

TABLE II  
UNITS OF MEASURE

- G-Gallons (liquids only)  
P-Pounds  
T-Tons (2000 lbs.)  
Y-Cubic yards  
L-Liters (liquids only)  
K-Kilograms  
M-Metric Tons (1000 kg)  
N-Cubic meters

- Item 15: SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION-Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information, if any. If an alternate facility is designated, note it here. For INTERNATIONAL SHIPMENTS, generators must enter the point of departure (city & state) in this space. This space may also be used for emergency response telephone numbers, and any other information the generator is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and USDOT hazardous materials.
- Item 16: GENERATOR'S CERTIFICATION-The generator must read, sign (by hand) and date the certification. This must be done by the transporter picks up the waste shipment (date of receipt by transporter). If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, air) inserted in this space. If another mode in addition to the highway mode is used, enter the appropriate mode(s) in this space.
- Item A: STATE MANIFEST DOCUMENT NUMBER-Number preprinted by New Jersey except on the continuation sheets. Enter this number on each continuation sheet attached to a manifest.
- Item B: STATE GEN ID-The State Generator ID is the street address of the waste generation site. If the mailing address and the site address are the same, enter "same".
- Item C: STATE TRAN # 111-Enter the New Jersey state permit number. This must include both the transporter's permit number and the decimal number of the hazardous waste transport unit or hazardous waste vehicle which contains the waste. For rail shipment(s) enter the alpha numeric I.D. number assigned to the railcar in lieu of the decimal number.
- Item D: TRANSPORTER PHONE-Enter a telephone number with area code where an authorized agent of the transporter can be reached.
- Item E: STATE TRAN # 211-If applicable, enter the New Jersey State permit number of the waste carrying portion of the second vehicle.
- Item F: TRANSPORTER PHONE-If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.
- Item G: STATE FACILITY'S ID-No entry is required by New Jersey.
- Item H: FACILITY PHONE-Enter a telephone number with area code of the TSD designated to receive the waste listed on the manifest.
- Item I: WASTE NO.-Enter the 4-digit hazardous waste number as it appears in N.J.A.C. 7:26G-5.1 et seq. (For example "K047" is the waste number designated for pink/red water from TNT operations.) The proper waste number that accurately describes the shipment, shall be determined according to the hierarchy at N.J.A.C. 7:26G-6.2.
- Item J: ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE-Enter description of analysis for any waste which does not have a complete USDOT shipping description or has an n.o.s. designation. Enter a general description of the waste stream, (i.e. groundwater contaminated with creosote and copper sulfate). Additionally, for any n.o.s. entry in item 11 which does not conform to the requirements at 49 CFR 172.203(c) enter the two components, and their percentages, which most predominantly contribute to the hazards of the mixture or solution. Enter the physical state (S = Solid, L = Liquid, G = Gas, SL = Sludge); EPA hazard codes (I = Ignitable, C = Corrosive, R = Reactive, E = TOLP, J = Acute Hazardous, T = Toxic). Enter additional information as required by the waste code hierarchy at N.J.A.C. 7:26G-6.2.

## TRANSPORTER SECTION

It is a violation by the transporter if he accepts hazardous waste from a generator who fails to properly complete the manifest, transports waste to an unauthorized facility, and/or fails to obtain the date and handwritten signature of the next hauler owner/operator of the TSD facility upon receipt.

- Item 17: TRANSPORTER 1 ACKNOWLEDGEMENT-Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.
- Item 18: TRANSPORTER 2 ACKNOWLEDGEMENT-If applicable, follow instructions for item 17 for the second transporter.
- NOTE: ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.

## DESIGNATED FACILITY (TSD) SECTION

- Item 19: DISCREPANCY INDICATION SPACE-The authorized representative of the designated facility must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected wastes. Owners and operators of facilities located in authorized States (i.e. those States that receive authorization from the U.S. EPA to administer the hazardous waste program) should contact their State agency for information on State Discrepancy Report requirements.
- Item 20: FACILITY OWNER/OPERATOR CERTIFICATION-Print or type the name of the person receiving the waste on behalf of the owner/operator of the designated TSD. That person must acknowledge receiving the waste described on the manifest by signing and entering the date of receipt.
- Item K: HANDLING CODES-TSD SHOULD COMPLETE-Enter the ultimate handling method utilized at the designated facility for each waste. Only the following process codes may be used: Storage-S01 (container); S02 (Tank); S03 (Surface impoundment); S05 (Other-specify); Treatment-T01 (Tank); T02 (Surface impoundment); T03 (Incineration); T04 (Other-specify); Disposal-D03 (Injection Well); D04 (Landfill); D05 (Land Application); D07 (Ocean Disposal); D08 (Surface impoundment); D09 (Other-specify).

\*NOTE: For interstate shipments you may be required to comply with the manifesting requirements of both the consigning and receiving states regarding the completion of specific information included in lettered items A-K. Please check with both generator and consigning states for specific requirements. New Jersey requires that all information be filed in except for item "G".

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimates including suggestions for reducing this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.